

THE GREAT SULPHUR CURE

BROUGHT TO THE TEST;

AND WORKINGS OF THE

NEW CURATIVE MACHINE

PROPOSED FOR HUMAN LUNGS AND WINDPIPES.

BY ROBERT PAIRMAN,
SURGEON, BIGGAR.

PREFACE BY THE REV. J. CHRISTISON, A.M.,
MINISTER OF BIGGAR.

SEVENTH EDITION.

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Note.—Dr. Halliday Douglas and Dr. Warburton Begbie kindly allow me to make the following extracts from private letters :—

Dr. Douglas says (29th October 1867) :—‘ I have read your MSS. with pleasure and very great satisfaction.’ ‘ Every thoughtful practitioner will thank you for the just and earnest character of your inquiry. The results you describe correspond with what I have had the opportunity of observing, and confirms me in the belief that the observations of Dr. Dewar have directed us to most important conclusions regarding the remedial value of sulphur,’ etc.

Dr. Begbie writes (Oct. 31, 1867),—‘ I have read your paper with interest and pleasure. Many of its suggestions are valuable,’ etc.

PREFACE BY REV. J. CHRISTISON, A.M.

IN lately visiting the sick I witnessed not a little of what is detailed in the following pages, and heard a great deal more from persons rejoicing in their recovery, and looking—some of them at least—as if they had been cured by magic. And no wonder; for who would have expected, at this time of day, such astonishing effects from the application of common sulphur? Strange that it should have stood on the Pharmacopœia for hundreds of years, with nine-tenths of its virtues unknown and unsuspected till within the last few months! Let us be grateful, however, to a beneficent Providence that they have become known to us at last, that we have received a new gift of greater value, perhaps, than Vaccination or Chloroform; not a mere specific for any one disease, however grievous, but something more nearly approaching to the character of a panacea than any other application known. But, after all, these allegations must not be regarded as established certainties, till they have undergone the test of a wider experience. In the meantime the trials made in this district have been very promising indeed: their further prosecution is in excellent hands. Dr. PAIRMAN's name is a sufficient pledge that it will be conducted skilfully, and that the result will be as faithfully recorded.

BIGGAR MANSE, 29th October 1867.

NOTE FOR THIRD EDITION.

FROM many kind congratulatory letters which the issuing of my pamphlet has called forth, I have great pleasure in selecting the following. Being highly important, both from the eminence of the writers and value of the practical hints contained in them, I give them entire :—

From Dr. LYON PLAYFAIR, Professor of Chemistry, University of Edinburgh.

‘14 ABERCROMBY PLACE, EDINBURGH, Nov. 9, 1867.

‘MY DEAR SIR,—I have read your Sulphur pamphlet with so much interest, that, though personally unknown to you, I cannot refrain from writing to you. Sulphurous acid, as a disinfectant, is among the oldest used disinfectants. Ulysses employed it to purify his mansion after he slaughtered Penelope's suitors. It seems to act in two ways:—(1.) By killing fungi and infusoria; (2.) By producing ozone during its own oxidation in the air, and thus acting also in the manner of Condyl's fluid, though in a much weaker way.

‘In the first action it is only excelled by carbolic acid, which, however, does not appear to have the second power.

‘In pursuing your inquiries, I would venture to suggest that you might sometimes with advantage add carbolic acid, but not in too large quantity. About 5 per cent of carbolic acid to 95 per cent. of the true sulphurous acid in its watery solution, appears to increase largely its destructive effect on the lower forms of organic life, without destroying the indirect oxidising agency of sulphurous acid. Although the latter is used in chemistry as a deoxidiser, I need scarcely say that I am not writing in ignorance when I still ascribe to it the reverse effects also.—Yours sincerely,

‘LYON PLAYFAIR.’

From Dr. JOSEPH BELL, F.R.C.S., Lecturer on Surgery, Assistant-Surgeon, Clinical Wards, Royal Infirmary, and to the Eye Infirmary, and late Demonstrator of Anatomy in the University of Edinburgh.

‘5 CASTLE TERRACE, EDINBURGH, November 11, 1867.

‘MY DEAR SIR,—Though I am personally unknown to you, your name is so familiar that I cannot feel myself a stranger, and take the liberty of writing you a few lines.

‘I have just finished the perusal of your most interesting pamphlet on Sulphurous Acid, and write to thank you for it most heartily.

‘We have been working away with Dr. Dewar's plan a good deal; and for my own part I am thoroughly convinced that it is a most important addition to the surgeon's weapons, as a most agreeable dressing for wounds and ulcers, and, as an almost miraculous means of relief in all cases of erysipyl throats, laryngitis, and cynanche tonsillaris,—I have great faith in it.

‘The cases which have impressed me most, however, have been:—Three very chronic and well-marked cases of *lupus non exedens* of the face—one of twenty years' standing—have been cured by it, and it alone. The patients come either to my house, or to the Thistle Street Dispensary, march in, get a few whiffs of spray over the face, and march out again with great delight. Professor Syme has, you may be aware, trusted for many years, in cases of *mentagra* and the chronic *scabby* sores of the face, to a lotion of acetate of lead and finely powdered *sulphur* in water.—Excuse my troubling you, and believe me to be yours faithfully,

JOSEPH BELL.

‘Dr. PAIRMAN of Biggar.’

PREFACE TO THE FIFTH EDITION.

AN APOLOGY TO THE MEDICAL PROFESSION.

THE following pages present some data in solution of the problem, 'Is the system of sulphurous acid medication true or false?' The answer has a momentous bearing on the interests of our country, and our future modes of dealing both with cattle epidemics and human diseases not a few. Though professing himself as yet no advocate of the system out and out, but only its honest and impartial judge, it is needless to conceal that the more the writer sees of it, the more is he convinced of its general utility; and that very soon, to think of practising medicine without a Spray-producer, will be as absurd as to practise midwifery without forceps, or surgery without chloroform. To get the problem thoroughly sifted and solved, yea, to stir to its depths the whole profession if need be, a humble member, toiling in its ranks, ventured to risk his professional character by a quackish title-page, and adopted a style of writing perhaps unduly merry, partly to make people stare and induce them to read. For why should empiricism monopolize such a mode of inviting attention? and why should 'valuable solid reading,' the great horror of popular journalists, be allowed to fall still-born from the Press, to draw fine compliments merely from competent judges, and as many pounds sterling from the author's pocket? The writer of this pamphlet, however, is no buffoon, but bears the character among his neighbours of being an earnest man, whose peculiarly jocular and merry style can scarcely conceal a vein of seriousness. No newspaper critic or private friend has yet urged an objection that was not anticipated. One kind reverend gentleman, an earnest and zealous preacher of the gospel, said, 'Your title-page, sir, is a downright "puff," that reminds me strongly

of Professor ——'s quackish pills.' A. 'That Professor knows best himself (perhaps better than his patients) whether the astonishing virtue of his pills be a fact or fiction. But what one calls "puffing" another may call preaching the gospel.' Q. 'What do you mean?' A. 'Are you a quack, my dear friend, when with a trumpet more earnest, though not so brazen, you proclaim aloud to all and sundry, "Ho! every one that thirsteth, come ye to the waters." Or is Isaiah a quack who put you up to the plan?' My friend mused a little, and then said, 'Ah! Doctor, I see you are right. Isaiah's "waters" can stand the test. There may be puffing in appearance without reality, and if your anticipations regarding sulphur be realized as a cure, it may be found a "great" one too.'

Another true friend, also a clergyman, said, 'The subject is important certainly; but, dear me! your hasty rushing into print has permitted some offences against good taste, that disfigure your pamphlet very much.' A. 'Another edition may yet show such stains "rubbed out in the washing." But your own sermons sometimes tell us the folly of paying undue heed to the tithe, mint, an eumin of things. Please, reverend sir, attend you to the weightier matters of the law. Luther's doctrine was not the less important, though he might sometimes preach with a pimple on his nose, scarcely worth the criticising.'

Then there was my style—'pith without polish,' or, as some editors called it, 'inelining to the jaunty.' A. Can the medical profession not be roused to its duty by anything short of a solemn sermon? Would it really have been seemly for an obscure individual to have assumed the serious, and lectured as a dominie Professors at whose feet he had often sat to receive instruction? Are our noble, disinterested, and philanthropic High Priests like the silversmiths of Ephesus, who manufactured idols for Diana's shrine? Surely not. Let their attention be only called to the matter, let them only know of it *in any way whatever*, and the work is done. Unfortunately, Dr. Dewar's calm, chaste, and sober style has been tried already, and, to some extent, been found wanting. With less flourish of trumpets than mine, his truly valuable and interesting pamphlet has been before the world for months; but instead of convulsing Britain to its centre, not till my pamphlet cordially saluted it, like two stranger country doctors shaking

hands together without the formality of an introduction, did the system of sulphurous acid medication make any appreciable change in our treatment of disease. The mission of my pamphlet has certainly been accomplished, if it has aided in pushing into wider circulation its senior brother, which, sooner or later, must have found its way, by its own merits, into all the libraries of the profession.

Though not anticipating the great circulation which my poor extemporized *brochure* has attained, I knew very well that with Mr. Christison's name (itself a tower of strength) adorning its title-page, and the honoured names of Drs. Begbie and Douglas showing countenance in the background, it could not fall stillborn from the press. I knew, moreover, that some earnest men throughout the country, attracted to the pamphlet in the first instance from motives of personal friendship to myself, were likely to discover from its important subject matter, that in taking my little production by the hand they were promoting the interests of humanity at large. Not that they could solve its problem for themselves (except by reasoning from facts like other people), but could see the importance of its being solved by somebody. But who could have anticipated that such eminent men as Dr. Lyon Playfair and Dr. Joseph Bell (both total strangers to its author) should have furnished it with such magnificent wings, to aid its flight into dignified quarters that its own lightness or volatility never could have reached? To all such kind, unexpected, and highly valued friends, though acting no doubt chiefly on public grounds, as haters of epidemics and lovers of man, the profoundest gratitude of the author is due. The further prosecution of this important subject is now committed to the physicians of our hospitals, and Gamaliels of great authority in the profession. But in view of what has been already accomplished, it is not presumptuous to admire the usual plan of the providence of God, in educating great things from small. As microscopic fungi are the messengers of God's wrath, and, at His bidding, may lay a continent waste by pestilence; so sulphur may yet be found the panacea furnished by His goodness to arrest its march. And it is quite in keeping with such a mode of working, that to disseminate this truth throughout our land, He may first call on one country doctor to proclaim it; then another country doctor to back him up, who, ignorant of the opinion on the subject of any medical man

in the world, had honesty to form his own conclusions, as well as nerve to cry out with boldness, arising from the consciousness of discovered truth. Dr. Dewar having the great merit of originating this system, his more slowly growing pamphlet has the stamina of the oak, and deserves to live. Mine, on the other hand, having served its end, can afford to die; a little medical 'fungus' at the best, rapid in its growth, likely soon to perish, and whose literary merit is a speck barely visible to the naked eye.

R. P.

BIGGAR, 23d Nov. 1867.

THE GREAT SULPHUR CURE.

(*A Free and Easy Letter to the* REV. J. CHRISTISON, A.M., *Minister of Biggar.*)

REV. SIR,—Believing that you take a deep interest in the parish, I inflict on you rather a formidable letter, to tell you something of the new ‘Cure’ and new ‘Machine’ recently introduced among us, destined, let us hope, to play a deal of havoc with some of our diseases, and contribute to the health and comfort of the people.

The Great Sulphur Cure! What is that? That sulphur is the grand specific for a certain eutaneous epidemic, nameless and unassuming, hitherto grossly maligned and despised? Not at all. But that on the basis of this indisputable fact have been reared a theory of disease and plan of treatment, fitted (as some think) to make a revolution in medicine, and regenerate the world. Having recently put this principle to the test both of reasoning and experiment, my object is honestly to tell you the result. But first you may ask, How did I come to learn of it at all?

Well, though Biggar be situated midway between Edinburgh and Glasgow, that does not exactly mean the centre of the earth, but a retired nook of the world hid by Bizzberry on the one side, and Tinto on the other, which important news of great events transpiring in Kirkealdy may take a time to reach. In the centre of civilisation just named lives a certain innovating ‘James Dewar, Esq., M.D.’ which means, I suppose, a plain country doctor like myself. Like some of his tribe, this gentleman presumed not long ago to issue a pamphlet by way of instructing the world how to cure diseases. A van-driver of our district, whose uncommon knack of fishing out all sort of strange and funny books, from both sides of the Atlantic, is quite commendable, happened to get hold of it; and after passing through various hands it came to me; a dirty, soiled, unpretending-looking thing, with some such title as ‘The Curative Powers of Sulphurous Acid Gas.’ ‘Pshaw!’ thought I, ‘what has a little man like that got to say on cures? Sagacious enough in one thing certainly; to give his curative gas as high-sounding a name as possible. Such a splendid chemical term means neither more nor less than the common sulphur fumes emitted by a lucifer-match when burning, that we smook our bees with and whiten our wool. And though many an old wife has told me that sulphur itself is worth its weight in gold, all ages and genders agree in regard to the nasty fumes, to get out of their

way as quickly as we can. Even the Bible itself represents Tophet and Gehenna as filled with them, to impress on us how fearful is the fate of the wicked in being compelled to breathe them!

The truth is, having recently been asked to write for a popular journal a few papers on diet, as it so happened I was scribbling over at the time the last of the series, entitled 'Stone Broth; or could the Millennium be ushered in by Pills?' And as nobody would like to have the quality of his 'broth' contaminated by sulphur, it was very natural to neglect the pamphlet. 'Can the van-driver expect me to awaken from my alluring celestial dreams by such a mundane, paltry, stifling thing as a sulphur smell?' The Millennium, however, being duly ushered in to my own satisfaction and the happiness of the world; in the very year 1867 too, as all the minor prophets from Dr. Cumming downwards confidently predicted; ushered in, alas! *only in a dream*, I then seriously perused the pamphlet. 'Pipes and tobacco! what is this?' was my first sensation of profound astonishment. 'This country doctor has ushered in the blessed era already, not in a dream, *but in downright reality*, in Kirkcaldy at any rate! A valuable and amazing pamphlet altogether, or rather "Millennial Harbinger," whose good news of deliverance to an afflicted world have been as much neglected by myself and others as Matthew's Gospel!' For what is the purport of all its doctrines? That a potency lurks in common sulphur which philosophers and physicians, statesmen and divines, to say nothing at all of lucifer-match makers, little dreamed of. That to sulphur fumes, as a curative measure, almost nothing in the shape of disease ever comes amiss; stifling into silence any great epidemic raging in the earth, as easily as they can stifle a roaring vent. Armed with this weapon, the magician, Dr. Dewar, cares not a penny whether called on to fight a chilblain or the rinderpest, to clear a hen-roost or choke the cholera: epidemics of all sorts and sizes, high or low, cattle or human, anything you like, 'It's a' ane to Dandy!'

In other words, that sulphur fumes are infallible in killing the poison of cattle-plague, pleuro-pneumonia, cholera, diphtheria, nearly all ulcerations of throat or windpipe, fever, asthma, asthmatic bronchitis, croup, perhaps consumption itself, glanders and greasy heels in horses, etc.; in fact, all zymotic diseases whatever; to say nothing of such trifles as chaps, chilblains, common colds and influenzas, hoarseness, sores of all kinds, skin eruptions, horses' hacks, that pest of mothers the 'snifters' in babes, etc. etc. Further, that these fumes, condensed by water into a liquid form, can be injected into human lungs and windpipes by a magical machine called a Spray-producer, and produce the most astonishing results, sometimes almost in the twinkling of an eye!

I am sure, Rev. Sir, you will agree with me by this time that the subject is important; that instead of a mountain in labour bringing forth a mouse, the process has been reversed. A little scribbling country mouse has brought forth a mountain—a mountain too of prodigious size. In the light both of reason and experiment, let us attend for a

little to this medical 'mountain,' this Etna or Vesuvius, by whose lurid flame and suffocating funes it is proposed to fumigate the world, and clear the earth of all its plagues.

REASONING.

Reflection I.—Is this man a crazed enthusiast, or a designing quack, or a rational being, who reasons like a philosopher, and details his cases like a medical man? Not an enthusiast certainly: for he proclaims his important message to the world with a seeming indifference perfectly distressing, and which would be highly reprehensible too, did we not remember that many pious doctors of divinity deliver a message of even greater weight, in a manner which suggests, 'There is the truth for you; believe it or not, as suits your fancy;' and that even the four Evangelists tell the story of their still more astonishing cures with equal coolness. Neither is he a quack: for with an honesty rare in such a tribe, he candidly confesses that some patients, far gone in consumption before the treatment began, actually died; that others took a whole week before showing decided improvement; that a third was only cured *minus* one lung, and though quite fit for ordinary work, had to pant and struggle when put to much exertion, like a man with a wooden leg hobbling at a race!

Reflection II.—Is his logic good? For my part I can find no flaw in it. To a non-medical reader it may appear surprising what similarity can exist between a horse's greasy heels and small-pox, or common 'itch' and Asiatic cholera; or what curious logic implies that if sulphur be a grand specific for the 'itch,' it should be equally infallible for cattle-plague, cholera, diphtheria and the like,—all resembling that humble eruption, he may think, in no earthly respect whatever. This, however, is a great mistake. If any sophism can resist this reasoning, I know not where it is to be found. For however these diseases may differ in some trifles, the grand essential point remains, that *they all alike take their origin from a parasitic source*. With less fatality, and less flourish of trumpets in some than others, the common parentage of all is 'minute microscopic living things, vegetable or animal, that grow and breed like other creatures. Diphtheria is as surely a French mushroom, vegetable and alive, as anything of the kind ever kicked aside by a human foot. *Ergo*, if sulphur kills or cures one parasite or fungus, why not another? The same poison which destroys a wasp is very likely to kill a flea. Thus the respectable and maligned malady, 'the itch,' promises to become the greatest instructor in the whole theory and practice of therapeutics which the world has ever seen!

Reflection III.—The rapidity of his cures rather strengthens this logic than the reverse. In some diseases it matters little whether their duration has been ten days or ten years. If the cause be a living thing, kill the cause, and the work is done. At first sight it does seem strange that an obstinate skin disease of some years' dura-

tion should disappear in a day or two; or that a pleuro-pneumonia, whose cannibal jaws had never lacked a good repast for a single month during eight or ten years, should be cleared from a byre, apparently for ever, in fifteen minutes! To a logician like Dr. Dewar this is not more surprising than that a man eighty years old should be as easily murdered as one of twenty. Though certainly his theory (apparently indisputable) of the essential similarity of all such diseases, high and low, sometimes leads to a novel jumbling of cases rather ludicrous. After due instructions on the way to clear rinderpest from a county, the next sentence may probably be how to manage a chilblain on the little finger. And in the midst of some thrilling pathetic stories about poor wasting human beings, snatched from the very jaws of consumption,—just as the reader is in the act of shedding tears of sympathetic joy, most opportunely may come a ‘case’ to dry them up again of ‘a valuable turkey cock,’ whose prospects its lady owner thought ‘very desperate,’ ‘in spite of all the skill which could be brought to bear upon his illness,’ being speedily restored to blooming sanity by similar means! The pamphlet is nothing the worse of this. Even a dwining hen, in testifying her gratitude for returning health, may cackle a lesson how to deal with a dwining boy.

Reflection IV.—May not some enigmas and curious freaks of chest diseases generally be explained on this principle? Look at asthma. A fit of asthma, of some days’ or weeks’ duration, may come on *in a moment*, from various causes, nervous and stomachic; but very usually from the patient venturing into a dusty barn, smelling a little musty straw, entering a bedroom while the bed is being made, etc. Thus minute and invisible particles of organic impurity evidently get into the air-cells, and while sticking there produce their poisonous effects—aye and until gradually dissolved by gross expectoration clearing them away. By a change of air the cure of these attacks is sometimes as sudden as their invasion.

Illustration.—The lady of a colonel in the British army was once residing at S——, whose pure atmosphere and well-aired house seemed sufficiently salubrious. An attack of asthma came on so severe as to resist all treatment. In a fortnight she was reduced to such extreme weakness and difficulty of breathing, that, thinking she must die, I ordered, as a last resource, instant removal to Edinburgh, where she had been accustomed to breathe freely. This was resisted for several days, on the ground of utter weakness and inability for the journey; but matters getting worse, and death almost certain at any rate, at length she was lifted from bed into a carriage, conveyed to Thankerton Station, and thence to Edinburgh. While half-way to Edinburgh she was breathing as freely as ever in her life! and though still weak, never needed any further doctoring. Could the sulphurous smoke from the engine, especially in passing through the railway bridges, not partly account for this? *Curious queries.*—Could any resident near Wishaw or Coltness tell us, what is the effect on asthmatics of a disinfecting smell from their various smelting works and blazing furnaces? Does a residence in that district ever cure such complaints, ever induce

them in temporary sojourners, or is asthma known by the usual residents in these districts at all?

Second Illustration.—I have repeatedly had asthmatic patients who could not stand the pure and salubrious air of the country, but could always breathe with freedom in the very heart of smoky London. This used to astonish me. But may not the sulphur in the coals explain it all? The smoke of a large city is not so bad a thing as we have hitherto supposed. What with one disinfectant in the shape of carbon, and another in the shape of *sulphur fumes*, it is nothing but a great vapoury sheet spread by a kind Providence as a protecting mantle over the inhabitants, but for whose benignant influence, fever, plagues, throat and lung affections, might riot more abundantly than they do in such congregated masses of human beings.

Third Illustration.—Dr. Halliday Douglas mentions a case of a consumptive gentleman ordered by his London physician to Wales for change of scene. He could breathe freely only when the wind happened to be in a certain direction. This was at first a mystery, until it was discovered that the health-bringing wind from that direction had to blow over some large 'smelting furnaces' before it reached his dwelling.

Reflection V.—It is perfectly certain that many diseases—fevers, for example—originate in an impure state of blood. The blood has received a dose of poison, which is supposed to multiply itself and work in that fluid after the manner of a ferment. More than twenty years ago I used to sigh for some medicine which, by entering the blood, would destroy that ferment, and frequently mentioned the thing to my friend Dr. Smith, as the one great desideratum of our age. Even consumption itself is a blood disease of this nature, originating in that vital fluid, existing there, perhaps, for years, till, by some causes being fomented into power, it finally localizes itself in the lungs and bowels. Well, why (without experiment) should it be considered nonsense that sulphur fumes should have some virtue in consumption, if there be any truth in the constant averments of great medical authorities (Dr. Churchill for example), who for some years have represented the various *sulphites* and *hypo-sulphites* of soda, lime, etc., as the best remedies yet discovered both for the prevention and cure of that disease? For what is a *sulphite* of soda or lime? Nothing but common *sulphur fumes* (or sulphurous acid, as its chemical name is) united with a base. Medical men have so frequently been hoaxed by 'certain cures' for consumption, that, for my part, having long given up the search as hopeless, I never thought it worth my while to give the slightest heed to any such advertisements constantly appearing in our medical journals. Though following, in this respect, the example of greater men, I doubt if we have been acting altogether wisely, and mean hereafter to give any poor patient the benefit of the doubt, when threatened or attacked by that intractable disease.

What confirms me in the propriety of this resolution, is an announcement in this present month's number (October 1867) of the *Edinburgh Medical Journal*. In an article extracted from a Jamaica newspaper,

we find an eminent physician, Dr. Alexander Fiddes, proclaiming to the whole profession, that in their future treatment of yellow fever (so excessively fatal in that island) they must throw aside their calomel and quinine, etc., and confine themselves, in the way of medicine, to a dose of eastor-oil to begin with, and then twenty-grain doses of the *sulphite* of soda, potash, or magnesia, every two or three hours. Apparently, without any knowledge of what is transpiring in Kirkealdy, he attributes all the virtue to the sulphurous acid saturating the blood, destroying the ferment, and cutting short the fever; and then adds, that the astonishing results of this plan of treatment he will shortly prove to the profession by abundance of statistics! *Query*, If these sulphites turn out the most effectual way of dealing with yellow fever, why not equally with small-pox, scarlet fever, rheumatic, typhus, and many other fevers and diseases supposed equally to arise from poisoned blood? Truly, all ends of the earth seem conspiring to proclaim the duty of testing and attending to the 'great sulphur cure.'

Induced by all such considerations, I resolved to bring this plan of cure to the test; and without being acquainted personally either with Dr. Dewar, or any medical man in the world, who, to my knowledge, had tried it, I felt it something like a duty to solve the problem for myself; determined to proceed gently and cautiously at first, to feel my way by slow degrees, and in no instance thoughtlessly to tamper with human life. Why should Biggar be behind Kirkealdy in anything? As for me, if I cannot starve my patients into health by gruel, fatten them into it by cod-liver oil, or poison them into it by a multiplicity of drugs,—why not choke them into health by sulphur fumes? My first experiment was tried exactly this day month (10th September), with some expectations of good results even from theory alone, but not without a shrewd suspicion that Biggar air or Biggar bungling would not quite come up to the mark of Kirkealdy.

EXPERIMENTS.

The subject having now assumed a very serious and practical phase, I beg to assure you, Rev. Sir, that in what follows I write with all the care and caution that matters of human life and death require. I will tell a plain and unvarnished tale, not consciously exaggerating in one point or another, but confessing failure where it happened, and wishing only to reach the truth; fully more anxious, indeed, to detect flaws in this new curative measure, than unduly to extol it. My responsibility is great in writing on such a subject at all, either in the way of condemnation or approval. For without supposing that my opinion can have much weight in other localities, it may easily be imagined without vanity, that a gentleman who, in a twenty-eight years' practice in Biggar, has acquired many kind and valued friends, can scarcely express any medical opinion at all, without its having some weight in our own district at any rate.

CASE I.—*Gastric Fever.*

On the 8th September 1867, I was called to see Miss —, residing at — Cottage, Biggar. I at once pronounced it gastric fever; and in two days it was very decidedly so. No delirium; but severe headache, requiring leeches, cold applications, and shaving the head. The most prominent symptom was distressing cough. But what gave me chief concern was the state of the tongue; very clean, very dry, and very red, indicating (as I thought) a tender state of mucous membrane, and the probability that obstinate diarrhoea would accompany the case, one of the most usual as well as alarming symptoms of gastric fever. As gastric fever of a bad type (as I was informed, and where it was supposed she must have caught the infection) was prevailing at the time in the two adjoining houses, and had already prostrated several of their inmates, on the second day of my attendance I ordered some chloride of lime as a disinfectant. 'Please, Sir,' was the reply, 'we do not know how to use it. Will you bring it yourself the next time you come down?' On my next visit the question was put, 'Have you brought the lime?' 'Dear me!' said I, 'I have quite forgot. Never mind: have you any sulphur in the house?' 'No; but it could easily be got.' I then took a kitchen-shovel, put on it some live coals, and laying the shovel in the middle of the floor of the sick-room, sprinkled over it half a tea-spoonful of sulphur. This producing no irritation to the patient's lungs, I added a little more sulphur, when she began to cough a little. The inmates being surprised, asked if these fumes would not increase the cough. I answered, that to relieve the cough was one reason of my doing it, as well as to keep the air of the sick-room sweet and pure, whereby I hoped both that the fever would be mitigated, and they themselves escape the infection; but at the same time honestly confessed that I had never tried the experiment before; I was only acting to the best of my judgment; if they had the slightest objection I would not persist with it. The answer was, 'Whatever you prescribe shall be implicitly obeyed.' The same fumigation was adopted twice a day during the whole of the fever; and the following was the result (but whether owing to the fumigation or not it would be rash to say):—1. The case turned out extremely mild, though expected to be severe, the patient getting the turn about the tenth or eleventh day, and the subsequent recovery remarkably rapid. 2. No bad symptom ever supervened, not even diarrhoea, except a very sharp purge from less than half an ordinary dose of castor-oil, showing the tender state of the mucous membrane. 3. In the course of three days or so the patient's cough left her entirely, except when the fumes filled her bedroom, and no cough mixtures or mustard blisters were given to relieve it. 4. None of the inmates (consisting however of only two other individuals) took the fever. The household are under the impression that the fumigation did good both in quieting the patient and relieving the cough, and would certainly call for fumigation again, were any of their number prostrated with fever. *Practical Remarks.*—Contrary to my expectation this fever might have

proved of a mild type (independently of the fumigation), though I scarcely think the cough could have been relieved in such a rapid manner. I only draw from it this conclusion, that fumigation is safe, even in a sick-room, if cautiously applied.

CASE II.—*Diphtheria, etc.*

Conceiving this conclusion to be just, I soon tried the power of the sulphur cure in several other cases as they occurred in practice, including two of mild scarlatina, several of hoarseness and common colds, sores and skin diseases, bad coughs of long standing, begun consumption, etc. etc. Most of these cases I dismiss very summarily, for two reasons—1. Because to detail them all would require a large volume instead of a letter; 2. Because having conceived the idea of writing about them only a few days ago, I took no notes of them at the time, and by trusting to memory might fall into blunder. I can safely say this, however, that with one exception (to be mentioned hereafter) in no instance was any harm produced; in some there appeared to be decided good. The only *serious* case of the whole (except consumption), the only case I mean threatening an immediate danger of life, was a very bad case of diphtheria in a young, delicate girl, in whom the throat affection had proceeded to a great extent before either the sulphur treatment or any other treatment began. I treated this case with the sulphur fumes, because my spray-producer had not yet come to hand. I was seriously alarmed for this girl's life on my first visit, and ordered the fumes to be carefully persisted in, not indeed expecting that they could choke or kill such a large throat mushroom (as we may call it), rooted and fixed on both tonsils, but in hopes that they might prevent the disease extending to the windpipe. My candid opinion is, that these fumes did good, perhaps even saved the girl's life. Yet, honestly speaking, this is a mere opinion or impression, destitute of decided evidence. Indeed, I cannot positively affirm that they did any good at all, for the following reasons:—1. I have seen cases fully as bad recover under the ordinary treatment, though, generally speaking, such cases are very apt to die. 2. Along with the sulphur fumes all the ordinary treatment was conjoined, caustic, chlorate of potash, Condry's fluid as a wash for the throat, wine, beef-tea, etc. etc.; and what was due to the sulphur, or what to the other remedies, it is impossible to say. 3. The great point is, that the patient, on the whole, made a good recovery; and especially, while no other disinfectant was employed in the house, *no other member of the family* (consisting of four persons) *caught the infection*. To show that they were as liable to infection as other people, I may add that they have only one apartment; and, a few months ago, one of the children having caught scarlet fever, the other two children, as well as another in the next dwelling, caught it too, whereof one of the children died.

But it behoves us now to proceed a stage, and say something of the New Magical Machine or Spray-Producer, that has now been in my possession exactly one week, since obtaining which I have jotted down some notes of such cases as appeared either interesting or instructive.

CASES III., etc., or a Jumble of Trifles, Odds and Ends.

1. *Horses' Hack*.—On October 5th, my second son, Adam, came to me saying, 'Papa, the black pony is lame!' 'Lame!' said I, 'I never noticed any lameness about it.' 'Oh yes, it has been a little lame,' said he, 'for several mornings, when I take it out to water; but I think it is all owing to a "hack."'" Sure enough, on examination, there was a hack on one of the forelegs, scarcely half an inch long indeed, but discharging matter, and quite enough to account for a trivial lameness. I caused him to cut off the hair, give the part a good washing, and then dry it well. I then applied one drop of the liquid sulphur (or condensed sulphur fumes, called sulphurous acid) taken from my spray-box. 'Now,' said I, 'we must apply this regularly morning and evening. I wish to see whether this, or our famous zinc-salve, be the quickest healer.' Next morning I lifted the horse's foot, phial in hand, to re-apply it. The hack was healed! the lips of the sore still gaping a little, but perfectly dry, and not the slightest trace of matter. The pony was never more heeded for several days, but constantly trotting through 'dub and mire' as usual, when I had the curiosity to lift the foot again to look at the hack. Nothing was seen but a little dry scurf, which I picked off with my nail.

Remarks.—Will grooms call this cure a trifle? Very doubtful. Is it really a trifle? As a cure of a sore, it may be so; but as a means of teaching physiological truth, it is, out of sight, the most important discovery within the whole range of veterinary science. If 'itch' and 'hacks,' in point of origin, have a common parentage with cholera, diphtheria, rinderpest, glanders, etc. etc.; if a touch of sulphur cures both of such trifles in a twinkling; who can yet calculate what may be its effect in dealing with the various destroying angels that afflict the world?

Excoriated Nipples.—Some two days after this, a lady patient of mine, nursing a baby at the time, sent in to me one of my 'Nipple Lotion' bottles to be refilled with the same precious fluid. This 'lotion,' I may mention, is a stuff that has been prepared at my laboratory for years. And such fame did it acquire for the purpose intended (generally healing such sores within a week), that not only my own patients in this district, but ladies from all parts of the country (from even many miles beyond Glasgow) used to send for it. I positively believe, had I taken out a patent for it, my fortune might already have been amply made. Alas! Dewar, I owe him a grudge. I fear he has given my 'lotion' a death-blow. With a trembling hand, shrewdly suspecting what might be the result, instead of refilling the lotion bottle, I gave a few drops in a phial of the liquid sulphur, with the remark, 'Try that instead.'

It was only yesterday that I heard the result. The nipples were healed at once. 'By how many applications?' said I. A. 'Either by one or two, I forget which.'

Common Cold and Hoarseness.—On Saturday last, the 5th October, at 4 P.M., I was called to a house in Biggar to vaccinate a baby. While performing the operation (if vaccination can be called by such

a grandiloquent term), in steps Miss —, the eldest daughter, all muffled up like a person colded, and speaking hoarsely. Some five or six persons were present, who can speak to the truth of what follows. Q. 'How long have you been colded, Miss —?'—A. 'For a whole week.' Q. 'Have you had a cough all the time?'—A. 'Yes, and quite stopped up in the nose.' Q. 'And always been as hoarse as that?'—A. 'Just much the same.' Q. 'What will you give me to cure you in three minutes?' Great laughing and merriment at this proposal from all present, and a question from Miss —, 'How do you expect to do that, pray?'—A. 'Never mind; leave that to me. I undertake to do it, if you will only sing to me one verse of the Hundredth Psalm, to the tune of "Old Hundred."' The idea of singing in her hoarse condition only added to the merriment; but I wished to try the effect of the spray on the vocal chords of the human larynx, and insisted on my fee. This being agreed to, her brother went down for the instrument, which had arrived the day before. She had only finished one line of 'All people that on earth do dwell,' when I cried 'Stop! stop! you have given us plenty of such wretched singing. I take you all to witness what a harsh "roupit" voice this lady has.' I then gave several whiffs into her throat, telling her to inhale her breath while I did so; and concluded by a similar operation first to one nostril and then the other. Immediately afterwards I said, 'Well, how do you feel?' 'A little ehoky, I think,' was the answer. 'You are certainly speaking better at any rate,' said I. 'Are you still stopped in the nose?' To the amazement of herself and all present, the stopping of the nostrils was completely gone! 'Now sing,' said I, 'other two lines of the same Psalm.' She sang two lines in her usual sweet, clear, and musical voice, almost fit for a concert! To all appearance I had fulfilled my promise, only instead of taking three minutes to the task, it was done in a sixth part of the time!

This took place on Saturday at 4 P.M.; the cure being nothing at all dangerous, and its cure only undertaken as a piece of fun, I never intended to pay another visit. But late on Sunday night I had to see little baby Ovens beyond the toll-bar; and my friend, the father of the child, accompanied me home to take up some medicine. Having told him this story on our way down, Mr. Ovens was so surprised at it, that we both agreed to call at Mr. —'s in passing, he to inquire if the story was not exaggerated, and I to see if the cure had been permanent. To my disappointment, I found Miss — still a little hoarse, but nothing at all like the previous day. On expressing regret to find her cold not yet entirely gone, she said, 'The truth is, Doctor, I have myself to blame for it. I kept perfectly well the whole afternoon and evening, but late at night went out without any shawl on me. It was foolish, certainly, *but I quite forgot that there was anything the matter with me.* That may be one cause of the slight hoarseness; another may be that I have been at church to-day, both forenoon and afternoon.' And an intensely bitter cold day it was. 'And what about the cough?' It, too, was greatly better, notwithstanding the two exposures already adverted to.

CASE IV.—Another Cold and Hoarseness—Warning about Asthma.

One of my earliest trials of the sulphur fumes was on a gentleman of wealth and high position in society, residing in one of the mansion-houses in our district. The case is hardly worth recording, but for the lesson it teaches, or warning rather; a warning which Dr. Dewar's own pamphlet rather ignores. I had been attending one of his girls for a cold of long continuance, and had been giving the ordinary medicines, ipecacuanha wine, etc., with little benefit. One morning I received a message that the gentleman himself was colded, and in bed; I had better call to see him. I found that he had been ailing for a week, was rather hoarse, but had scarcely, if at all, any cough. The proper treatment should have been the spray, but as yet I had not received the instrument. I suggested and explained to him the sulphur cure, to which he consented, though his lady consented with great reluctance. It so happened that a stranger gentleman and his wife were on a visit at the time, and great curiosity being excited to witness this strange medical innovation, this stranger gentleman said to me, 'I am anxious to witness the performance too, but dare not. I am a great martyr to asthma, and am almost certain it will bring on an attack. At present I am perfectly well, and won't risk it.' I assured him that it was recommended as the best cure for asthma yet discovered; that in Kirkealdy it was a regular domestic institution, practised by all and sundry to preserve health, as well as cure disease; that as a tonic there it was superseding steel and cod-liver oil; and that even the scholars in the various schools were fumigated several times a day (according to Dr. Dewar), with the happy result of both improving their health and sharpening their intellects, by keeping the air always fresh and pure. Induced by my advice, the gentleman remained to witness the process.

While the room was filled with fumes, I caused my patient in bed (for lack of a spray-producer) to inhale now and then the steam of hot water from a jug. The steam and sulphurous acid fumes uniting caused a sort of artificial spray, identical in chemical composition with the spray of the instrument. Very soon the asthmatic gentleman rushed out, saying, 'I have had enough of it.' Shortly after, the two ladies. The children began to rush out too, but I held by force my young patient, little Miss. I kept the room filled for half an hour or so, with nobody present but the patient, Miss, and myself. And in reflecting on it now, I think probably more sulphur was used than there was any occasion for. On leaving, I said, 'I positively think, Mr. —, you are speaking better already.' I then told him, and he promised, to repeat the process at night. 'I will call again to-morrow morning,' said I, 'not that you are so bad as to require a visit, but simply that I would like to see how you are.' On my next visit, I found Mr. — going about the house apparently well, and little Miss's cough better than it had been for weeks. But they had not repeated the process at night. I asked the reason. 'My wife,' said he, 'would not hear of it on any account. Besides, I was

better at night, either with the medicine or fumes, or both together, and did not need it.' 'But for the sake of little Miss,' said I, 'you should have done it.' I then asked to see his lady, and recommended another dose to Miss. The only answer was, 'Oh! those nasty fumes, I won't submit to another trial.'

It struck me as rather odd that a lady, who always appeared to have the utmost confidence in her medical adviser, and had obeyed his advice most implicitly before, should prove refractory after seeing the good results of a single trial. But there was a reason for it all, an enigma that I got explained only yesterday (10th October). The occasion was this:—Yesterday morning I was called to see the gamekeeper of this family by the lady's orders. Understanding that it was a case of sore throat, I took my spray-box with me. The gamekeeper had been ill with ulcerated sore throat for several days (the effect of cold and bile), but by good treatment, such as mustard-poultices, blue pills, etc., he was greatly better, and probably would have been quite well to-day without any more ado. All that remained was a slight degree of tenderness of throat and difficulty of swallowing,—to relieve which, I gave him a few whiffs, with the view of hastening his cure twenty-four hours or thereby. The man immediately said, 'My throat is perfectly right; I have neither pain nor difficulty of swallowing.' This was rather good not to let the lady know all about it, by way of retaliation for her former sneers against the sulphur cure. So of course I called just by the bye; I knew the lady would be anxious to know about the gamekeeper. In answer to the question, 'How is the gamekeeper?' 'Oh! quite well,' said I. 'One minute before I called he was complaining a good deal of his throat; the next minute I had it all right.' 'Indeed!' said she. 'How did you manage it so quickly as that?' A. 'By the sulphur cure, to be sure, which you despise so much.' In uttering these words, there possibly might be the slightest approach to a twinkle of triumph, not easily avoided. It could not, however, amount to rudeness; for she immediately told me with the greatest kindness and good-humour what was her objection to the sulphur fumes. 'I am perfectly conscious,' said she, 'that my husband was the better of them, and Missie too,'—'Yes, I was,' cried Missie,—'but do you know, Doctor, they brought on the stranger gentleman such an attack of asthma, perhaps the worst he ever had in his life. He got no relief till the afternoon, nor complete relief even for several days. I would not for the world have allowed a puff of them again while he was with us.' After recovering somewhat from the mingled feelings of sorrow, shame, contrition, and surprise with which this announcement overwhelmed me, I asked, 'Why did you not tell me this before?' A. 'I tell you it even now only from a sense of duty to put you on your guard. The gentleman was so satisfied that you acted from kindness, and to the best of your judgment, that he begged of me not to reveal it lest it might hurt your feelings.' After thanking her most cordially for such an act of kindness, I begged that she might allow me to make use of this case as a warning to others—a favour which she allowed very reluctantly, and only on my

telling her (what hitherto I had kept secret) that I was collecting notes about this cure, and putting it on its trial. 'As an honest man,' said I, 'I wish to probe it to the bottom, and find its flaws as well as merits. Hitherto, the only fault I have ever detected about it is, that it does not invariably come up to expectations. But this is a very serious matter.'

Remarks on this Case.—Though I have never yet tried the sulphur cure in asthma, this case appears to me a striking demonstration (so far as mere reasoning can prove it without trial), that in asthmatic attacks mild sulphur fumes will operate like a charm. How so? Because, wherever the seat of asthma may be, sulphur fumes act on that seat, and therefore must stimulate it when in a state of disease. For an inflamed eye, one never would apply a lotion to the nose, but to the eye itself; and the lotion, to be effectual, must be of such a strength, that, dropped into a healthy eye needing no stimulation, it would raise inflammation in it. In like manner, for the cure of liver complaint, nothing can be expected from any medicine that acts solely on the kidneys, but from something that acts directly on the liver itself—calomel, for example. Yet a huge dose of calomel in a healthy person would infallibly induce a species of artificial liver disease, just as this gentleman had inadvertently raised in him what we may call an artificial asthma. This is the sole secret of the maxim *similia similibus curantur*, just a plain common-sense truth, on which so much nonsense and quackery have been raised.

Practical Conclusion.—Persons of weak chests, if quite healthy at the time, should not needlessly expose themselves to fumes unduly strong; and from reasoning alone, I confidently predict that patients with a cough will stand a stronger dose of them *without coughing being excited*, than people in health with no cough at all. *2d Lesson.*—As a curative measure, long continuance to mild fumes is safer and infinitely better in every way than a shorter exposure to stronger fumes.

CASE V.—*Very serious Case of Inflamed or Ulcerated Windpipe and Pharynx.*

I am detailing these cases not at all in chronological order. Beginning with trifles, we come now to something of a more serious nature, and possibly may get to consumption by-and-by. When this case occurred, I had only as yet tried the sulphur fumes; but intending to operate a little on human windpipes, I had sent to Dunean and Flockhart a few days before for a Spray-producer. Knowing well that human windpipes, throats, and lungs were tender, delicate, and sacred things, I regretted much that, with the sole exception of Dr. Halliday Douglas, there was no doctor, so far as I knew, to whom I could apply for guidance and instruction, and with Dr. Douglas himself I was not personally acquainted. But reasonably enough concluding, that if the physician of Chalmers' Hospital was like the other principal Edinburgh physicians, he was not likely to think it any breach of etiquette for an unknown country doctor to ask a few important questions, I wrote a

letter, being sure of a civil answer at any rate. The answer was couched in not only civil and polite, but kind, almost affectionate, terms; its purport being an encouragement to proceed with my experiments; and though not yet in a position to give a *decided answer* in regard to consumption, with other diseases of throat, chest, and windpipe, 'like yourself I anticipate good results,' etc.

The instrument arrived twelve hours earlier than the letter; and, curiously enough, it was not ten minutes in my possession till the following case, as if sent by Providence on purpose to test it, afforded a striking proof of its power:—On Friday morning, the 4th October, while (in consequence of a midwifery case during the night) I was still in bed, an urgent message came to my house for me to visit *immediately* a gentleman holding a Government situation not far from here, said to be bad with a sore throat. Either through some neglect the message was not delivered to me as urgent, or, in consequence of my own sleepy brain, I did not hear it as such. Taking a nap first, I soon rose and set off to the country, quite forgetting the poor patient altogether. On returning at noon, another message came, conveying great amazement that I had never called, and a request that I would go at once, for he was in great distress. I found him in bed, looking miserable, and complaining greatly of pain in his throat. He had a fly-blister on a large swelling below the chin, painful to the touch, which I took to be a swollen gland, arising from the internal irritation, and likely to suppurate. On looking into the throat, I could see nothing wrong with it. He then pointed to the windpipe and pharynx as the seat of pain. The history was this: the internal irritation had begun two months ago, probably in consequence of his business; one part of his duty being to spend two hours every morning *in an open gig* between a railway station and his office, viz., from five to seven; and two hours every night similarly exposed, from six to eight—the morning hours, especially at this season of the year, being decidedly the worst in all the twenty-four for windpipes even in a healthy state. Though slight at first, the pain and difficulty of swallowing had gradually increased, and become greatly worse for the last two days. Soon after the internal irritation began, a little swelling like a bean showed itself under the chin, which, keeping pace with the inward disorder, was, at the time of my visit, the size of an ordinary apple, but not so round. 'My difficulty of swallowing,' said he, 'is so great, I have never tasted a drop of water the whole night, nor tasted food this whole day; I cannot get over even a drop of tea.' I told him that his whole windpipe and throat would need to be washed out with an astringent gargle, and forthwith sent off for my newly-arrived instrument, fondly hoping it would 'make its *début* with great *éclat*.' Before injecting the spray I asked him to try one teaspoonful of cold water, which, with great difficulty and many grimaces, he succeeded in swallowing. I then gave him some twelve or fifteen whiffs of the spray, and immediately afterwards asked, 'How do you feel?'—A. 'I can swallow my spittle much easier at any rate.' I then put a teacupful of water in his hand. To my own astonishment, as well as that of his wife and

himself, he gulped down several mouthfuls with the greatest ease! told me that the pain was almost if not entirely gone! and immediately added, 'Away, gudewife, and prepare some food; I'm tremendous hungry!' I then told him to keep quiet in bed, and I would call at night to repeat the operation. On calling at night and looking into the bed, the bird had flown; he was engaged in his office, sorting some letters! I then asked his wife if his swallowing powers had managed a little arrow-root, or anything similar, since my last visit. Arrow-root! he had enjoyed two good hearty meals; one of them a *minced collops* dinner as usual. [Note.—Rev. Sir, in case you think me writing a sensation novel, please call at the office when that way, and ascertain for yourself that all this is strictly true. Were I writing a novel, I would never think of anything so extravagant.]

Next morning he was so decidedly better, I did not think it necessary to repeat the operation; told him all he would need was care and a dose of medicine. Even the size of the swelling had much declined, the internal irritation which had occasioned it being nearly removed. The weather being frosty at the time, and intensely cold, most unfortunately I carelessly neglected charging him to keep within doors; probably for the same reason as one might neglect to charge a fractured limb newly bandaged up, on no account to get up and dance a reel! This was all on Saturday morning. The next sight I saw of him was on that same evening, just at six o'clock, while beginning to get dark. On coming up from the 'Cadger Brig,' and walking fast to keep myself in heat (the night being bitterly and intensely cold), the Government gig goes whirring past me; and unless there was some great ocular delusion, to my great horror and amazement who was within it, but somebody (well wrapped up indeed, as the night and an open running blister on the throat required) as like my patient himself as could possibly be! In vain did I hold up my fist, and shake it in his face in a threatening manner, as the most eloquent and telling mode of crying, 'Madman! do you mean to kill yourself?' Her Majesty's mail was not to be interrupted by any such foolish menaces. Nor is this the worst. That was defiance to frosty air the second. Unaware of the danger, and conscientiously desirous to do his duty to Government, he had, unknown to me, risked the same exploit in the morning between five and six. Observe, Reverend Sir, the astonishing nature of this exploit. On Friday at noon, an inflamed or ulcerated windpipe or pharynx, of two months' duration, had come to the climax already described. In exactly seventeen hours thereafter he begins his usual open-air occupation at five o'clock on a cold frosty morning, because (as he afterwards told me by way of apology) *he thought he was almost completely better!* a feat of daring, though conscientious, performance of duty, compared to which such paltry tricks as eating fire, or swallowing a huge naked sword (that used to make us stare so much of old) are perfect baubles. The fact that he ever thought of such a thing, says a great deal in favour of calling the Spray-producer a magical machine; and the additional fact of his coming home alive, shows that human windpipes may not be such delicate tender things as medical men declare. But you will not, I

am sure, be surprised to learn that a serious and much more tedious *relapse* was the inevitable consequence.

Relapse.—Next morning (Sunday), a message came down for me to see the gentleman again, 'He was worse than ever!' But when that message came to my house I was beyond his reach, being on the borders of Tweedsmuir, engaged with a case of a different character. On returning at night I immediately called. He was indeed worse in every respect except one, the difficulty of swallowing being not quite so great as on the first visit. But he was hoarse, constantly hacking up immense quantities of phlegm and mucus; tongue remarkably foul; skin hot; pulse very feverish; the gland below the chin now a huge swelling from ear to ear; the whole face also swollen, especially beneath the eyes; great difficulty of speaking at intervals; and though the difficulty of swallowing was not quite so great, it was very considerable. The patient had been waiting eagerly for my visit, expressed great joy at seeing me, and hoped I would give him the same relief as formerly. Conscientiously believing that if some patients must be starved into health, others fattened into it, etc., this one would need to be frightened into it in the first place, I determined to inflict on him such a lecture as he was not likely to forget in a hurry. 'My dear hearer!' I began, 'this playing at windpipe curing being rather a ticklish game, and this being Sunday night at any rate, you cannot be the worse of a serious sermon suitable for the occasion. I choose for my text those pithy words of the sixth commandment, "Thou shalt not kill." And before attempting to cure you a second time, would beg to preach from it a short discourse on the *ordinary way* of curing your disease when of two months' standing, etc., etc.' I then detailed in their order the leeching, fomenting, blistering, antimonials, and expectorants, confinement to a room the whole winter, reducing the system, then cod oil and iron to get it up again, the sighing for genial weather, cursing of east winds, etc.; to complete the cure, the change of scene, the disappointment, the medical consultation with some eminent professor, the professor's regret that after the very judicious treatment already adopted he can only suggest, etc. etc., and then the patient's *coming home to die*. I then concluded, 'This being the usual way of cure, I have to tell you, candidly and seriously, that not only may it possibly be your own, but for my part I see not the slightest hope of averting it, unless you co-operate with your medical adviser, and in right earnest begin to take care of yourself. Under any treatment whatever you must be confined to the house for a length of time. As for driving out in a gig at five o'clock in the morning, I tell you frankly that though you were well tomorrow, you won't be allowed to go into your garden except during the heat of the day, for the whole ensuing winter, without a respirator at any rate.' The patient being duly and deeply impressed with such an unexpected theological exposition, only mused a little without a remark, and then said, 'But what is to become of the Government work?' 'That,' said I, 'is a problem I have nothing to do with. Though all the governments of the world go to wreck, my mind is made up: either implicit obedience, or I walk out with my spray-box in hand, without administering another dose. For observe, my

dear sir, paltry and insignificant as you seem to think your own life, not so in my estimation is the success or failure of my machine. You have been honoured by being made the subject of its first experiment, and it must have fair-play. The issue is momentous to me and my patients. Because if it can cure you, the rational conclusion is that it may cure others made of the same flesh and blood.'

The patient having come under all due submission, I then administered the spray, with the immediate effect of relieving at once pain, difficulty of swallowing and of speaking. The effect was not so striking as at first, partly because expected, and partly because the power of swallowing was not entirely lost. But the patient, of course, continued feverish and unwell in many respects, and was altogether or nearly confined to bed for several days. On Monday morning I found that all the throat symptoms still existed, though not so badly, and that the spray immediately again gave relief; but his general condition in no respect improved. I ordered warm poultices to the throat, and medicine for the bowels, and intended to apply the spray more frequently, say three or four times every day. Alas! for the uncertainty and mistiming of a country doctor's life! I never gave the spray again till Wednesday night, a whirl of business of different kinds preventing. I never once saw him on Tuesday at all, nor Biggar either, being tied the whole of that day to a bedpost at Castle Craig, and spending the time (for want of anything better to do) in beginning and nearly finishing this letter to you. A country doctor is the worst person in the world for such a work as I have taken in hand. Never did I more eagerly wish for a week of quiet and reflection to conduct these experiments, and write the result in peace and calmness, after due thought and consideration. Instead of that, the whole week has been a whirl of excitement with midwifery cases, spray injecting, writing letters to Edinburgh, Glasgow, Kirkealdy, and I know not where; ploughmen half killed with their horses; sulphur burning, etc., etc. All this time attempting to reflect and philosophize, beginning this letter to you on Tuesday last at Castle Craig, writing snatches of it here, there, in all ends of the county, or at home, as I could find leisure, and taking great care amid all this excitement neither to diverge one iota from the truth, nor raise palpitation in my own person. Really, reverend sir, you must excuse many errors in writing, and offences against good taste, that would be very unpardonable in such a finished composition as usually emanates from your own study.

But to return to the patient. On Wednesday night I found his state not materially changed, and that for want of the spray he had taken my advice, and occasionally indulged in the inhalation of sulphur fumes conjoined with steam as a substitute. On Wednesday evening I put him into the hands of another doctor, seeing that this irregular visiting of mine would never give himself or my instrument a chance. This doctor, or rather young aspirant to the honour of M.D., not yet quite fledged, was my own son; who, being very proud of a first patient, was most attentive to his duties; and promised to administer a dose of spray four times daily, as duly directed. From that time till now progress has been forward, and on the whole satisfactory. I now

write on Saturday at half-past two; so that he has now been under this treatment for three days. I stop for the purpose of visiting the office and giving the latest report.

Saturday, 12th Oct. 1867, 3 P.M.—Greatly improved in many respects. Pulse weak, but not so feverish; tongue clean; appetite a little better; complains of a stitch in the back; feels weak and sickly, partly from medicine in stomach which has not yet operated. Very depressed in spirits, because his throat is not so much better as he expected; great hacking of phlegm; still some difficulty of swallowing and speaking occasionally, which are always relieved after the spray. External swelling not above a third of its former size. I ordered for him light meals frequently repeated, half a glass of sherry three or four times daily, a large fly-blister over the larynx, and to continue the spray. My opinion is that the case is hopeful; but there being evidence (as I think) of ulceration in the larynx or pharynx, the case will probably be tedious. I leave a space in this letter to tell the result.

Monday, 14th Oct.—Ordered him yesterday to discontinue the spray, and keep a constant mild taint of sulphur fumes in his bedroom instead. To-day much improved in every way.

Wednesday, 16th Oct.—Since last report progress forward and satisfactory. To-day greatly better *in every respect*. Still the slightest degree of internal irritation and difficulty of swallowing. Still hacking up a little phlegm, which contains some streaks of blood (only seen to-day), confirming my notion of the existence of ulceration.

Friday, 18th Oct.—So nearly well that I may almost dismiss the case as cured. There may be some slight tenderness, and need to guard against relapse during the whole winter. But already we are talking of a respirator to let him out soon. *Note.*—I jotted down all particulars of this case from the beginning, resolved to tell the result, and expecting that result to be failure. My candid opinion is (after an experience of twenty-eight years) that this gentleman under all ordinary treatment would certainly have died; and that, should his recovery prove permanent (as it promises), he owes his life, under God, to Dr. Dewar of Kirkealdy. *Note 2.*—Lest any reader may think this case detailed in a style too merry for the patient's feelings, I beg to observe that his own sanction has permitted me to tell his foolish exposure, Sunday lecture and everything. After all, how many of us endure needless relapses without such a good excuse as a strict attachment to duty, and eagerness to return to it at the earliest moment we think ourselves fit?

Note for Third Edition.—*Nov. 13.*—Continued gradually to improve. The external gland suppurated after all. Keeps quite well, and out in all weathers for the last fortnight, protected by a respirator.

Note for Seventh Edition.—*Dec. 4.*—Apparently quite well; has resumed his open air work at night: sometimes with a respirator, sometimes without.

CASE VI.—*Cough of nearly a Year's duration.*

A young Miss in Biggar was seized in December 1866 with inflammation of bowels, complicated with pleurisy in the left side of a severe

character. For three weeks or a month her life was nearly despaired of. She was confined to bed all winter, the effusion from the pleurisy being so great, that during all that time the lung gave a deadened sound on percussion, and from the constancy and severity of her cough, I greatly dreaded consumption as the issue. No remedies seemed to take much effect; but on the approach of good summer weather she greatly improved in every way. During the month of June the cough left her, or nearly so, but began again in July and has since continued. All the ordinary remedies were tried for it, in addition to repeated changes of scene. When I began the sulphur fumes on 5th October 1867, her cough was very considerable, especially in the mornings and during the night; a slight degree of wheezing in the chest of long standing—not every day alike, some days scarcely perceptible, but after any exposure sure to be worse. At this time, too, the palms of the hand were generally warm, indicating a slight degree of fever, and the night sweats were constant and excessive. When I recommended her to be exposed one hour night and morning to the sulphur fumes, it was under the idea that, the cold season now setting in, the cough was almost certain to get worse, and continue so during the winter. Treatment began Oct. 5.

Result, Oct. 10th.—This day made a special visit and jotted down the following on the instant:—Her mamma says, ‘R—is all but well.’ Whereas she used to cough incessantly all night, more or less all day, and had always a bad brush every morning, now she has no cough at all, except still a considerable brush in the mornings. Look of health greatly improved. No heat in hands. I found her in a dusty room, amusing herself with the servants while ticks were being turned up, and a great amount of organic impurities floating in the air. I told them that this one exposure with an asthmatic patient might retard the cure, and confine many a one to bed for a fortnight. I resolved not to be disappointed though the cough were to return for two or three days.

12th Oct.—Fully better than when I saw her on the 10th. On the night of the 10th she did cough considerably, but none last night. Still coughed this morning a little, but very loose. The cure may almost be said to be complete. *Note.*—The girl who administered the fumes has had a sore nostril, up within on the mucous membrane, since the month of June, which she never could heal by glycerine, zinc ointment, etc., and this little obstinate sore has become better during the one week’s exposure to the fumes. *Resolution.*—I am treating at present some obstinate skin diseases, of many years’ duration, with the lotion. If they won’t yield to the lotion I must try the fumes. (To be continued if thought necessary.)

Oct. 20th.—Cough not yet quite gone. But the fumes have done immense good undoubtedly. General health and appetite greatly better.

Note for Seventh Edition.—*Dec. 4.*—Still keeping comparatively well, and, as I think, has escaped consumption.

CASE VII.—*Obstinate Skin Disease of Eight Years’ duration.*

This case is that of a clergyman, one of my own most valued friends, and probably the most rigidly conscientious servant of his Master that

I have the privilege of knowing. He has had two considerable sears on his face for the last eight years, one above the right eyebrow, the other extending down the face between the cheek and nose. To the cure of this affection I set myself in right earnest several years ago; and after exhausting in vain all my resources, sent him for additional advice to some of the most eminent men in the profession, with a like result. For some years the clergyman had given up all hopes of ever finding any cure, and all thoughts of trying doctors more. Nor would he have thought of it yet, had I not rather abruptly asked him, about four or five weeks ago, 'Please, sir, will you oblige me by allowing me to try and cure your face?' The astonishment which this abrupt question excited in my friend may perhaps be participated by the reader, when I inform him, that at that time I had never tried the sulphur cure. At the moment I was looking out for some of the most inveterate cases I could find, to put on its trial another plan of cure, scarcely, if at all, inferior to that of sulphur itself. From the importance of the subject, and to introduce to your notice the power of *diet* over diseases generally, please allow me to diverge a little from the sulphur, and tell you a short story about another medical cobbler, more insignificant than the Kirkealdy cobbler still.

This country cobbler had lately a bad attack of functional heart affection, to such an extent as caused both himself and friends to think he was dying. Being very weak, he was taking all sorts of nourishing matters to recruit his strength, as well as drugs suggested by kind and skilful medical friends in Edinburgh, to cure his palpitation. Away from business at the time, and having little else to do but think, a thought occurred to him, 'Strength is imparted not by what the stomach receives, but by what the stomach can thoroughly digest.' Having pondered on this very plain axiomatic truth, he thought it contained a curative principle very applicable to his own disease, which, when applied, operated like a charm. 'If this disease,' thought he, 'one branch of the great trunk dyspepsia, be so amenable to the "right eating cure," why not fifty other branches, or nearly all the ills that flesh is heir to?' The more he thought of it, the more he became convinced that right eating, or perfect digestion and nutrition, was a curative weapon of tremendous power—that the obvious maxim which the whole world admitted in theory almost the whole world ignored in practice. That men's systems often get too little nourishment by their stomachs getting too much—were literally starved to death by a superabundance of nutritious food! And as he cured himself first by logic in his mind before he did it in his own person, so there and then he cured numbers of his former patients (thought quite incurable) by logic too; and found, on coming home, that its practical application to these cases was equally irresistible. He jotted down his principles of eating, What to eat? How much? How? and, How often? Illustrated their power by some striking cases (which had previously resisted not only his own former treatment, but the treatment of some of the most eminent of our physicians) and sent the paper in (meant as a contribution to a popular journal, and therefore filled with fun and jocularities) to some of the greatest wiseheads of the profession in

Edinburgh,—their general answer being, ‘valuable and interesting,’ ‘ought to be published,’ etc. In short that, with all their jocularity, the papers contain serious and important medical truth. Induced by this consideration, I (beg pardon, the cobbler I mean) will probably offer them to some popular journal. And I mention this story for two reasons:—1st. That should they be accepted by any journal, this story may account for, and partly excuse, such a jumbling together of trashy nonsense with a substratum of important medical truth; and 2d, Because the clergyman whose case I am now relating had been exactly one month on the ‘eating cure’ before the sulphur treatment began; and the healing process seemed to have set in, in some small degree, so as to afford hope of its ultimately being completed. But after finding, by experience, the healing powers of the sulphurous acid lotion, I thought it my duty to give him the benefit of it; although it was one of the conditions of the diet process when we commenced, that except a blue pill or so to begin with, no medicine, external or internal, was to interfere with the experiment. Indeed it is not always safe to attempt healing such sores (perhaps safety valves to the system) unless the blood be properly purified, and the whole system improved, which can be done effectually and permanently by perfect digestion and assimilation alone. The sulphurous lotion, then, was first applied on 7th October, so that this day (13th) it has now had six days’ trial. Both sores are a little better, only being *hard, dry, elevated* above the skin, and of eight years’ duration, the cure (if ultimately successful) must be tedious. I almost venture to anticipate a perfect cure by-and-by by means of diet and the lotion combined, and that if once healed, a healthy state of stomach and blood (induced and maintained by the ‘eating cure’) will prevent a relapse. (Space left for the result).

21st October 1867.—Extract of a letter received to-day from the clergyman: ‘My face, in my opinion, still continues to mend; very slowly, indeed, but I trust satisfactorily. The lotion has certainly done it good. But, in justice to the dietetic principles you inculcated on me, I must add that the healing process had apparently begun before the lotion was applied. Further, though I thought myself in good health before, my appetite and general tone of system are greatly improved. The improvement in my eyesight especially is very marked,’ etc.

October 30th.—The lotion has not fulfilled expectations. Perhaps no external applications can cure this case. Diet treatment is the only chance. But whether the promise of amendment shall continue I dare not say.

Nov. 4th.—Looking better to-day; apparently healing well.

CASE VIII.—Case of threatened or begun Consumption.

On Friday, the 2d October 1867, my much esteemed and skilful friend, Dr. Crawford of Peebles, sent a letter to me, accompanied by a patient (who was a relation of my own), requesting that I would carefully examine him, and report if I could ‘suggest anything further

in the way of treatment.' A growing lad, age nineteen, rather badly formed chest, had contracted a cough in early spring; had tried change of air for it repeatedly, cod-liver oil, quinine and sulphuric acid, croton oil to chest, etc. The uvula, tonsils, and back of the pharynx covered extensively with granulations, which were coated with yellow muco-purulent matter. Dr. C. had sponged over these parts with caustic twice a week. But matters were gradually getting rather worse, besides cold weather setting in. The expectoration of muco-purulent matter was very abundant, and tinged with blood; a good deal of wheezing in various parts of the chest, especially under the left clavicle; sound on percussion pretty clear, except in the lower part of left side in front. Dr. C. hoped phthisis had not yet begun, but evidently threatened.

On the patient entering my house, a great cough at the door brought up a considerable amount of brownish purulent matter tinged with blood. After careful examination, I wrote as follows:—

‘BIGGAR, 3d October 1867.

‘MY DEAR DOCTOR,—I wish I could be as thoroughly satisfied with the condition of—— as I certainly am with your treatment of him. You appear to me to have tried all ordinary means applicable in similar cases. But, notwithstanding your judicious treatment, I fear he runs a great risk of falling into phthisis, if not indeed beyond the borders of it already, unless something can be done to check that great discharge of purulent matter tinged with blood. In addition to his age, duration of the cough, etc., this discharge appears the most alarming symptom. Where does it come from? A great deal certainly from the granular mucous membrane of the pharynx; some, probably, from the same membrane of the bronchial tubes down to their most minute ramifications (from the râles of the chest this is likely). None, *it is to be hoped*, from any burst tubercles or lung cavities. Come from where it may, we must, I think, apply some astringent lotion (as it were), in vapour, of course, to the *very parts affected*,’ etc. I then detailed the process of sulphur fumigation, suggested an hour of such fumes morning and evening, and requested him to procure Dr. Dewar’s pamphlet and judge for himself. Both of us agreed that a viper was hatching, if not already hatched, though it had not yet, we fondly hoped, firmly laid hold on, or eaten any holes into, the poor boy’s lungs.’

On yesterday, the 12th, I wrote the following letter:—

‘BIGGAR, 12th Oct. 1867.

‘MY DEAR DOCTOR,—Now that —— has had a week’s trial of the fumes, please tell me how he keeps, by giving short and clear answers to the following:—1. Any diminution of the cough? 2. Of the purulent expectoration? 3. Any difference in the appearance of pharynx? 4. Still any trace of blood in sputa? 5. Any improvement, or the reverse, in the general health?

‘I am jotting down a few notes of cases at present, or putting the Sulphur Cure on its trial. What do you think of putting the patient

on Dr. Churehill's *Hyposulphites* or any other *sulphites* of soda or magnesia instead of cod-liver oil? The sulphurous acid of such sulphites is supposed to enter the blood, and attack the enemy at its fountain-head (see *Medical Journal* for this month—*Art. Jamaica, Yellow Fever*). — should take care to have his evening fumes in his own bedroom, and not expose himself to cold after them. Dr. H. Douglas approves of long exposure to weak fumes, instead of such strong suffocating ones as to make people cough much.—I am, my dear Sir, yours most sincerely,

R. PAIRMAN.'

'Dr. CRAWFORD, Peebles.'

Note.—This case is detailed up to this date, without hearing any accounts of the patient's condition. I mention this to show the honesty of my trial.

ANSWER, dated 15th Oct. 1867.

Being rather long, and alluding to other matters, I give only the substance of it:—1. *The Cough*.—Not materially improved, but the parents think 'rather better.' 2. *The Expectoration*.—In *quantity* much the same, but in *quality* much better. 'It is less purulent, and floats in water better than formerly.' 3. *The blood* in expectoration.—Still some blood now and then. Some days not quite so much. 4. *The appearance of Pharynx*.—Greatly better, 'in fact it is now pretty well.' It was improving by the caustic, but 'the sulphurous acid has done it still more good.' 5. *The General Health*.—Never was very bad. 'He feels quite well except the cough.'

It strikes me that this answer is on the whole extremely encouraging. Almost every symptom slightly improved, others decidedly so, whereas formerly he was always getting rather worse.

Oct. 21. Having heard by an oral message on 19th that — was still keeping rather forward, I visited Peebles to-day, and in consultation with Dr. C. we agreed as follows:—'Decidedly better *in every respect*. We think the sulphur fumes have served him much. Should the improvement continue, we consider it not a case of *cured* phthisis, but of threatened phthisis arrested in the meantime.

R. C.

'PEEBLES, 21st Oct. 1867.'

R. P.'

Note.—From the result of this case, Dr. C. has been using the fumes, and sulphurous acid internally, in a bad type of scarlet fever prevailing in Peebles at present, and authorizes me to state that he is quite satisfied of their good effects.

Note for Third Edition.—Like Dr. C. I have since tried the same plan in scarlet fever, and found it to answer well,—viz., occasional fumes, spray or sulphurous acid gargle, and acid internally every hour.

Note for Seventh Edition.—Dec. 4.—Dr. Crawford reports 'Patient improving, and gaining weight.'

CONCLUSION.

It would be easy, Reverend Sir, to multiply examples without end. Though using the sulphur fumes before, it is little more than one week

since either the Spray-producer or Sulphurous Acid came into my possession. And when I tell you that the half of the cases are not detailed, that never a day passes without my requiring to use the one or the other, generally with advantage, never with hurt (except in the one case of asthma), I am sure you will agree with me that these agents are destined yet to play an important part in medical science. I decline to give any decided opinion on the merits of the 'Great Sulphur Cure.' I only state facts, and allow people to judge for themselves. But without anticipating the magnificent results expected by its proposer, I can cautiously and thoughtfully state the following as the result of some experience and observation not here noted down:—

1. In a great many external maladies, hacks, chilblains, running ears, excoriated nipples, open sores of every kind, it is invaluable; as a hair-wash for seurf, it is admirable; as a wash for ulcers, its healing powers are great; as a dressing for recent flesh wounds, it is perfectly wonderful altogether. Indeed, I suspect that pyæmic fever itself, that fatal plague of hospitals, may be as easily managed as 'snifters' in babes, that plague of mothers. Between sulphurous acid and pus there seems as great antagonism as between fire and vapour. The acid simply dries it up and annihilates it. *Ergo*, By all the rules of logic, what can pyæmic fever do but die of starvation, from want of the pus on which it feeds?

2. In a recent case of slight sore throat (where the inflammation covered all the uvula and tonsils), one injection of the spray cured it so quickly, that I just thought, Well now, had that been incipient diphtheria, would the spray have killed the young tender fungi quite as rapidly? Perhaps it would. And could that infectious disease, by being nipped in the bud, be thus prevented from extending in families? In Kilkenny, at any rate, this destroying angel, as a *spreading* epidemic, seems to be shorn of half its terrors.

3. Since it seems to be an established fact that, in seasons of rinderpest and pleuro-pneumonia, no such plagues come nigh any byres where systematic fumigation is carefully practised, why, in seasons of diphtheria or other epidemics, should not all houses in the neighbourhood be stately and carefully fumigated too? Would the village of Elsrickle, where the houses are generally small and confined, have suffered so much from diphtheria six years ago had this precaution been adopted? I think very decidedly not. Fumigation is harmless.

4. In coughs, colds, windpipe and chest affections, we may congratulate ourselves on acquiring a weapon to fight them on something like the same terms as we fight an ulcer in the leg; an agent to ferret out the enemy and attack him in his secret hiding-places, instead of chiefly dealing with him by external applications. We can smother the bees instead of blistering the 'skep' where they are buzzing! The smothering will not always kill them, indeed. Neither will an ulcer of the leg always heal. But it is certainly a comfort that some healing remedy is applied directly on the sore in either case.

5. What about consumption? We will be wise not to expect anything great. But since vegetable fungi have been detected both in the expectorated matter of consumptive patients, and in lung cavities after

death, who can calculate how much these fungi may promote the disease, and how much their destruction may help to cure it? Besides, is it not something encouraging that even the physician of Chalmers' Hospital, while in regard to other diseases 'anticipating good results,' hesitates in regard to consumption before he can give a 'decided' answer? Verily, Rev. Sir, if these anticipations be realized; if sulphur be the means; 'itch' the instructor; a country doctor's byre the academy; the owner of that byre the great schoolmaster sent by Providence to elucidate and disseminate the truth among us all; it surpasses in importance the lessons learned in other byres by the immortal Jenner; and preaches aloud to all mankind, 'God hath chosen the weak things of the world to confound the mighty; yea, and things which are not, to bring to nought things which are.' How foolish of any to ask, 'Can any good thing come out of Nazareth,' or Kircaldy?

6. I have private sources of knowing (though I dare not mention names) that one of the most sagacious of our Edinburgh professors 'augurs great results from the extended adoption of the Sulphur Cure.' What these 'great results' may be, it is impossible to say. But though not accustomed to interpret Scripture much, my experience in interpreting the short, pithy, and enigmatical utterances of that cautious man suggests, that more is always meant than appears on the surface. Without supposing them to mean a revolution in medicine, or the regeneration of the world, would it be an abuse of private judgment to suppose that the 'great results' may comprehend, *firstly*, very shortly a conflagration of our quack pills, pulmonic wafers, and pectoral candies; and *secondly*, The conversion of our drug shops into manufactories of sulphur? Further, who knows but that some pugnacious cobbler, at a *pro re nata* meeting of the United Colleges held on the occasion, might propose as a legitimate subject of dispute, 'What influence would it have on the happiness of the world, to substitute for our recently issued *British Pharmacopœia* an improved edition of *Meg Dods' Cookery*?'

7. May we not anticipate a great mitigation of fevers generally, cutting others short, etc., from sulphur fumigation? Dr. Alex. Fiddes seems to prove this. What is the mitigation of yellow fever by sulphites, but (according to his own theory) sulphurous acid in the blood producing its natural effects? and what a more natural or easier mode of getting it there, than by absorption directly through the lungs? Does not inhaled vapour of alcohol make people drunk, and breathed oil of turpentine show itself in the urine? Thus fumigation seems better in some respects than ventilation itself. Ventilation only pitches the enemy out of the window, and prevents imbibing additional doses of the fever poison, the same poison that laid the patient low. But while fumigation can do as much as this, if it really be absorbed, *it attacks the enemy also in the blood itself*. This is dealing with fever poison and the blood as any rational man would deal with arsenic and the stomach, supposing that stomach was always taking in some additional arsenic at every meal. 1st. Purify the food. 2d. Pour antidotes into the stomach itself.

8. Equally good results, one would expect, must accrue to attendants. Besides, as a slight sulphurous smell adheres to clothes after fumigation for a considerable time, may ministers of the gospel, city missionaries, etc., not almost take for granted that a slight fumigation of themselves, shortly before visiting a sick-room, will secure them against either catching infection themselves, or carrying it to their families?

9. In the meantime, What is to be done with Dr. Dewar himself? Burn him alive in his own lurid flames, and his magical machine into the bargain, as our forefathers would have done? No, no, in this advancing *unwarlock* age. We can only give him a vote of thanks. To be sure, we have been trying that gentleman for 'murder.' The verdict brought in has been 'Guilty, my Lord!' But when we bear in mind that the victims of his wrath have been the various destroying angels which afflict the world, why should the fellow not at once be 'strung'—in effigy, of course—on our parlour walls, as a cool designing murderous philanthropist and benefactor of the race? To grant a testimonial in money would be as ridiculous as valuing health by ounces of gold, and as absurd as driving coals to Newcastle. The doctor will soon be rolling in wealth by his new patent for converting salmon and herrings into seones! This is positively true. The anti-septic treatment has as miraculous effects on dead meat and dead fish as on living men. By preventing putrefaction such materials can be kept sweet and pure for any length of time. By a process of drying and pounding into meal, the finest and most nutritious of bread, such as beef-baps, mutton-biscuits, and oyster-cookies can actually be baked; and the last accounts from Kirkealdy are, that he is just now engaged in securing patents in all the countries of the world for this very end! This is another little grudge that a certain little mind owes the doctor, who always dreamed that if the two cobblers were to unite their forces, the one to kill poison from without, the other to kill poison from within, the general superintendence of the 'eating' department should somehow or another have been left to the latter!

Finally, if you think this letter important, that it is an honest trial of a doubtful subject,—that the Sulphur Cure should be more extensively adopted in neighbouring parishes,—that a flame from Biggar Auld Crossknowe should extend some sparks, not to Peebles only, but as far as Hamilton and Crawfordjohn,—I give you leave to send my letter to your relative, Professor Christison of Edinburgh, if you feel inclined; to let the Professor show it to Dr. Halliday Douglas; to let Dr. Douglas declare whether the results of my short and hurried experience correspond with his own, *so far as it goes*. And, if the report from Chalmers' Hospital be favourable, it may be an afterthought between us whether this letter should be seen by any other eye in the parish but your own.—I am, Rev. Sir, yours most respectfully,

R. PAIRMAN.

BIGGAR, October 13, 1867.

APPENDIX.

16th October 1867.

SINCE the foregoing Epistle was despatched to the minister, I have been to-day called to a case pretty well fitted to test the soundness of my hopes in reference to diphtheria. I take notes of it as it proceeds, and will honestly tell the result, whether it proves favourable to these hopes or the reverse. For a reason to be stated, I call the case

A FIGHT WITH DIPHTHERIA.

Some six years ago, diphtheria prevailed in Elsrickle and neighbourhood with unusual severity. The number of deaths was frightful. Among others died a young lady in a neighbouring mansion-house, daughter of probably the most heroic of our Indian generals, and most useful in quelling the Indian Mutiny. But if there was one house in the whole district where the enemy seemed to concentrate his force, it was the farm-house of H——. Here I had to fight single-handed with all the usual medical appliances for eight or nine weeks; neither friend nor neighbour almost dared to assist. The result was decided victory on the part of diphtheria; the list of casualties being two killed and five seriously wounded, from this family alone. To-day I got a message to visit this family *immediately*, for the youngest son, James, had been ill with sore throat since yesterday, and 'they were sure it was the bad throat.' Being prevented from going for half-an-hour, I sent with the messenger some chlorate of potash powders, and a gargle containing sulphurous acid, writing on the envelope of the bottle, 'Not to be touched till I come myself.—R. P.' On visiting shortly afterwards, sure enough I found it decided diphtheria, and threatening to be of a bad type too,—a large slough on each tonsil, foetid breath, foul tongue, haeking of phlegm, hot skin, feverish pulse, etc. I immediately told the family, 'Now, this is most assuredly the old enemy that killed two of your number, and made your hearth so desolate six years ago. I tell you this to put you on your guard. But keep up your spirits; for I mean to fight him with a different weapon,—only rest assured that your safety lies in implicitly obeying my injunctions.' All were only too eager to attend to them. In case, however, the poor patient might be discouraged, I added to him, 'As for you, James, you have no cause for alarm at any rate. I expect to relieve you in a very few minutes. The fight chiefly means keeping the rest from catching the infection. I then injected some spray into his throat; but first caused him to swallow some water, to try the power of the spray in relieving pain. The patient expressed himself as greatly better, and swallowed some

water much more easily. I then told him, as a curious circumstance, that sulphur fumes and steam formed the very same spray as what had relieved him so much at present; and if he wished to be speedily cured, he could scarcely be inhaling it too often. I then showed him how to use the gargle. In opening the cork, one of the sons stood back with suspicion, expecting some fearful explosion or another. On my laughing at his fears, he said, 'Why write on the bottle, "*Not to be touched*," etc.?' 'Because,' said I, 'I wished to look the foe fairly in the face, and see whether he was likely to be dangerous. The gargle might have altered things entirely, and made me doubtful whether it was the old adversary or no.'

The eldest son is fortunately a very clever, intelligent young gentleman, well educated, and thoroughly up to all modern ideas of *fungi*, *disinfectants*, etc., and he undertook to see all my instructions carried into effect; so that if I fail in gaining the victory it cannot be for want of an efficient Lieutenant. The enemy, on his side, has equal advantages, having been twenty-four hours in possession of the field, and that one of his former fields of triumph; the very first shot of his artillery having evidently been meant to be a serious one, if not, indeed, of a deadly nature. Even now while I write, I can scarcely avoid such feelings as a general might experience in commencing battle, when he exults in the hopes of a brilliant triumph, and feels that the issue of the contest is more momentous than either Austerlitz or Waterloo. I jotted down in writing for the guidance of my Lieutenant his 'Fighting Orders,' and should they prove effectual I commend them to the consideration of all medical soldiers.

FIGHTING ORDERS.

1. Mild sulphur fumes almost constantly in the sick-room.
2. Occasional inhalation of steam from warm water.
3. Occasional poultices or warm fomentations to throat.
4. Gargle to be used frequently, and then a little swallowed.
5. A calomel pill at once, to be followed by castor-oil if necessary.
6. A chlorate of potash powder to be dissolved in a tumbler of water, and used up in small draughts in twenty-four hours.
7. Finally, and most important, should any one member of the household feel the slightest touch of sore throat, to use at once gargle, fumes, and steam, and send for me.

Note.—I applied no caustic, under the impression that it can scarcely destroy the fungi, but may screen them from what is able to destroy them.

I then left, and promised to call to-morrow.

Oct. 17.—When Cæsar described some of his immortal victories, it was in three graphic and most telling words, '*Veni, vidi, vici*;' a specimen of thrilling historical eloquence only equalled in the first chapter of Genesis. Fain to save time would I adopt such a pæan of triumph as my own. But it won't do. The battle still rages fiercely on both sides; victory doubtful, but I think slightly inclining to the

side of right. The enemy in no respect dislodged from his strongholds. Both tonsils much swollen, and still covered with *sloughs*, held out by the adversary as flags of triumph. It strikes me that the right side flag is not quite so audaciously displayed to-day. A shot of spray from Dewar's tremendous cannon having again given great relief, I left the piece of ordnance in the hands of my Lieutenant, with orders to be used very frequently till my visit to-morrow. I ordered also the *whole house* to be fumigated once a day, lest the insidious foe might be lurking in ambuscade in some hole little thought of.

Oct. 18.—Visited to-day the Crimean field. Signs of victory in Sebastopol at any rate! which means, of course, the patient's throat. The shots of spray have been frequent and effective, dislodging the enemy from one Malakoff Tower or tonsil, while his force is decidedly weakened in the other. A medico-clerical friend accompanied me to-day, who was highly satisfied both with the relief afforded by the spray, the energy displayed in the 'fighting orders,' and manner in which Lieutenant T. was carrying them into effect. Ordered wine and beef-tea, and a continuation of all the former tactics. *Pulse* still very quick; *face* flushed, and *skin* hot.

Oct. 19.—Progress still satisfactory. The *fever* of war quite abated; its *pulse* of excitement quiet and steady; the citadel of health *out of danger* from the enemy's brisk but futile onset, though he still shows a feeble flag on the left Malakoff. My Lieutenant thinks he can deal with the foe now without my help. 'Well,' said I, 'see and watch him well; and for the sake of the other citadels not yet threatened, don't neglect to give the whole "Castra Quadrata" a smell of gunpowder once or twice a day at any rate.' This he promised faithfully to do; and this indefatigable officer, though strong in mind, having been rather weakly in body for several years, my final advice was—'In covering yourself with fumes, you may not only cover yourself with glory, but perhaps with a bloom of health besides, that your cheeks have not seen for many years.' A. 'Indeed, Doctor, it strikes me I am a little the better of them already.'

Oct. 20.—Latest despatch from the seat of war. Lieutenant T. writes:—'J. keeps on improving.' 'Getting rather a better appetite.' 'Still two small spots in the throat.' 'Getting out of bed.' *Answer.* Told him to keep brushing the spots with sulphurous acid, and for the safety of the rest, not to neglect fumigating the *whole house* for a time. *Lesson.*—Fumes are harmless, and don't increase *fever* at any rate. For it was while the sick-room was almost constantly filled with them, that the fever abated in a marked degree.

Nov. 4.—The patient's recovery satisfactory, and up to this date no threatening of attack on any other inmate. The enemy apparently slain.

Practical Conclusion.—People of Elsrickle, and of every hamlet in the land! attend to this ease. Clean your houses; see to your ditches; dry up your *dubs*; look to your drains; and if diphtheria again invade your village, why not scare him from your hearths by lurid burnings systematically adopted, and choke him to death by sulphur fumes?

CASE X.—*Cancer of the Lip.*

16th Oct. 1867.—Strictly speaking, this should have been noticed under the head of ‘Trifles.’ What! call cancer of the lip a trifle? Certainly. Because such sores are not generally real cancers at all, but mere local incurable sores, with hard cartilaginous edges, that won’t heal by any applications; and though they will certainly kill the patient if neglected, they may take twelve or fifteen years to do so, which allows ample time to excise them with a bistoury, a slight operation almost invariably successful. Be this as it may, I happened to have such a case in hand before hearing of the sulphur cure. I told the patient at the first that it must come to the knife; but as it had only existed some six weeks, or thereby, beginning with a small blister that never healed, he might try a little salve in the first place. Some three weeks of the salve doing no good, it was agreed to cut it out any day he chose to come to me. But people have a natural affection for their lips. It was always to be done ‘some day;’ but before that day came, I came into possession of the sulphurous acid. So, on the 5th October, I gave him a small phial of the acid mixed with glycerine, and told him to keep a piece of lint constantly wet with it on the sore. Having more important cases to attend to, this case was neglected till two days ago. On calling to ask for him, the patient being out, his wife told me it was no better. ‘But the truth is,’ says she, ‘it has never had a chance. He won’t be seen with white lint on his lip, and is scarcely ever at home.’ ‘Indeed!’ exclaimed I, ‘and your husband in such imminent danger of his life!’ which being interpreted, means, ‘Please, ma’am, advise him to give the lotion a trial.’ Strangely enough, even this device was not sufficient, for, on calling to-day, I found that the lotion was still neglected, or imperfectly used. Not to be done with such an unruly patient, I changed my tactics. ‘Here have I now been your family doctor for many years, and during that time have done you all the good I can. You cannot refuse such a small favour as allow the lotion fair play for two days’ time. This lotion is a new thing, and I am exceedingly anxious to test its powers. Your lip is but a trifling sore, but *most unhealing*; if it can cure it, what a lesson it will teach me how to cure other things of more importance!’ This appeal had the desired effect. I applied the lint myself to-night (16th October), and he promised to keep within doors for two whole days, and keep the lint always wet with the lotion. The result shall be stated on the 18th.

18th October 1867.—Unsuccessful. For a short period (for the healing powers of sulphurous acid seem a question of hours rather than of days) it promised well. But my opinion is, it must come to the knife. I will try for a few days longer.

22d October 1867.—‘*Carthago est delenda.*’ I excised the sore to-day with the aid of my professional brother, Dr. A. Kello. It is almost gratifying to find one case of failure. Amid all my eager searching for flaws, positively I was beginning to fear that the most serious flaw of all was hurting the *material*, by improving the *therapeutical* resources of the profession!

CASE XI.—*Hæmorrhoids or Piles of several years' duration (Nov. 3).*

A lady patient of mine, of sedentary habits, has been afflicted with piles for three or four years, not at all times alike, but often bleeding, festering, and extremely painful during that period. Concealing her complaint long, the disease went to such a height, that two months ago she consulted me and submitted to an examination. I found them swollen, inflamed, and painful to the touch; told her that an operation was her only chance; and intending to send her to Professor Syme if necessary, I offered in the meantime to apply a ligature to the more prominent as a means of affording temporary relief. She agreed to this; but first I put her on some sulphur and cream of tartar internally, and advised the frequent application of either warm or cold water cloths, as she found most suitable. This treatment doing some good, the ligature was never yet applied. Three weeks ago she took a dish containing burning sulphur, and contrived by some convenient apparatus to have the fumes applied directly to the parts every night before going to bed. After the *third* or *fourth* application all bleeding and festering ceased, and the pain became greatly relieved. To-day (3d November) *she is all but perfectly cured*. There are still some remains of the piles, but nothing to give her any inconvenience. Probably a little spray would have been equally effectual. On asking her what superior skill had put her up to such a plan, she said, 'No doctor's skill at any rate, but that of Mr. J—— N——,' mentioning the name of a shrewd old Biggar mason. In less than three minutes I was in the mason's house, and found to my surprise that he had never heard the name of Dr. Dewar. An old 'pensioner body' on the bounty of the Castle-Craig family had told him of this in the year 1803! Since then he had recommended it in 'scores' of cases, and never once knew it fail either in making a cure, or at least 'durring,' *i. e.*, soothing the pain very quickly. I told the gentleman that his name might yet live, long after he was dead, as the 'Biggar Mason.' 'But, you old rascal!' I continued, 'why did you not tell me this thirty years ago, and save the world from many a groan, long before "Dewar" or "chloroform" was heard of?'—A. 'You laugh so much at "old wives' cures," I never thought it worth my while.' He then repeated the names of many parties who had used it.

NOTE.—When the first edition came out, some true friends of mine, of taste and refinement, seriously objected to this case being introduced into a popular pamphlet. 'What!' said I, 'must etiquette then be the grave of usefulness? and must secretly suffering multitudes not be relieved lest a false delicacy be offended?' The following letter, I think, from a most respectable lady, and published by permission, is a sufficient answer:—

'—— 18th Nov. 1867.

'SIR,—It may gratify you to learn that the reading of your pamphlet has enabled me to cure myself of bleeding piles by two applications of a sulphur lotion, furnished by you for a neighbour's sore hand. The first application caused great smarting for about fifteen minutes; then all pain left, and perhaps the second dose was needless, but I put it on.—Yours most gratefully,

'To DR. PAIRMAN, Biggar.'

'————.'

Note.—This lotion consisted of—Sulphurous Acid $1\frac{1}{2}$ oz., Glycerino $\frac{1}{2}$ oz., Water 2 oz. Mix.

CASE XII.—*Erysipelas or Rose of Face.*

Late on the evening of Monday 11th Nov., Mrs. H—, aged sixty seven, residing at a farm-house near Broughton, had with erysipelas in face, sent an urgent message to me to see her *immediately*, the erysipelas having extended across the nose to both cheeks, a large blister on one cheek from the severity of the inflammation, the pain of a burning character, and both eyes shut up from swelling. Unable to attend at the time, I ordered a dose of castor-oil, gave a lotion consisting of equal parts of glycerine and sulphurous acid, and promised to visit by first train in morning.

12th.—This morning she expressed herself as free of pain; and instead of the eyes being shut up, there is scarcely swelling about them at all; though the patient is very feverish, tongue very dry, and she appears to me to be in a serious state. 'When did the pain leave you?' asked I. *Ans.* 'On the instant after the lotion was applied.' *Q.* 'Was your sight restored as rapidly as that?' *A.* 'Not quite; it took several minutes before the swelling about the eyes subsided.'

13th.—Visited to-day. Still very feverish; inflammation extending down the neck and across one ear. No pain. When pain threatens the lotion checks it.

14th.—Scarcely a trace of inflammation except on left ear, and on scalp amongst the hair. But constitutional symptoms very bad, the most alarming of which are weakness and restlessness; the patient having scarcely tasted food since 11th. Prescribed wine, beef-tea, and tincture of steel every two hours.

16th.—The severity of the local symptoms decidedly subdued, apparently checked; but constitutional symptoms no better. Pulse quick and intermitting, restlessness, thirst, great debility, etc. But being no worse since last report, and there being no delirium, the case is hopeful.

18th, 8 A.M.—To save me the trouble of visiting to-day, the husband has just called, reporting his wife as greatly better. Yesterday the inflammation spread on brow and down one cheek a little, but to-day appears completely killed. Curiously enough, however, she had considerable local pain and smarting which the lotion did not control until the afternoon. How to account for this I know not. But the disease has lasted exactly one week, and except in its origin and death she never complained of pain at all.

Remarks on this Case.—Some medical men, thinking erysipelas a kind of fever, and its specific inflammation virtually a rash analogous to the rash of scarlatina, may doubt the propriety of controlling the inflammation so much as sulphurous acid seems to give us the power of doing. For my part I think the treatment was good; that had the patient died, she would have died in spite of sulphur, and that since she lives, she lives partly in consequence of it; because if to the serious constitutional symptoms had been added very severe local pain and inflammation, she might probably have succumbed. The family had no idea that the clear watery-looking lotion, when first applied, had

any sulphur in it. But so astonished was the husband at the rapidity of its effects that he said, 'This must be some other new thing of the Doctor's, very different from the brownish stuff (iodine) that he used to give my daughter.' Does this case not explain, almost with the force of ocular demonstration, how spray acts *so quickly* on the inflamed and swollen mucous membrane in stuffed nostrils, sore throat, laryngitis, etc.? Dr. Joseph Bell writes me that some of his cures in these affections have bordered on the 'miraculous.' If this case is not a key to the 'miracle' performed in such hidden cavities, it seems at least its counterpart visible to the eye.

Note.—While this case was being treated at Broughton, another case, almost precisely similar, was being treated in Cowgate, Edinburgh, by an intelligent trustworthy student in connexion with the Thistle Street Dispensary. The two cases were so nearly identical (the one in an adult, and the other in a child), the lotion and its results being so much alike, that we may consider it as a truth now established by the mouth of two witnesses, that sulphurous acid is the best application yet discovered for erysipelas.—(Certified to me by one of the Physicians of the Dispensary.)

CASE XIII.—*A Story important to Public Speakers.*—(18th Nov.)

The indefatigable Mr. George Easton, Agent of the Scottish Temperance League, is subject to bad colds, which generally last several weeks; and as he has to address meetings almost every night, they are apt to go on from bad to worse. Such a cold shut his mouth (not easily done), and debarred him from all meetings during July and August of this year. On Wednesday last he caught such a cold. It was growing worse daily, though he was still performing duty, till he reached Biggar on Friday forenoon, for the purpose of advancing the cause of temperance. Having addressed a meeting at Skirling on Friday evening, on Saturday his cold was making progress; some huskiness or hoarseness was beginning to set in, which made him very concerned about the work before him next evening, to end probably in other two months' vacation. On Saturday night he happened to get hold, in the Biggar Temperance Hotel, where he was residing, of the First Edition of my pamphlet. He began to read; before being half-finished with it sent for me in haste; told me his predicament and fears, and asked if a little spray would not help him. 'Help you?' said I, 'only promise to keep silent till Monday morning, and I'll have you cured.' For two nights past, he had coughed incessantly for upwards of an hour on going to bed before falling asleep. And the cough was none of your gentle things, but hard and pithy, stout and earnest, that reminded one of his own stentorian oratory! He would not promise to give up the meeting, but requested a few whiffs at once. After fifteen whiffs or thereby, I told him to have an hour of the fumes in addition before going to bed. That night he never gave a cough, but 'slept like a top' till morning. Coughed slightly during Sunday,

but quite loose; addressed his crowded meeting on Sunday evening; felt nothing the worse of it, though the night was frosty; repeated both fumes and spray before going to bed; and after another night's repose, rose on Monday morning in great glee and spirits, found his gloomy fears of being torn from his work at once dispelled, and himself a great enthusiast in another cause besides that of temperance. With apostolic zeal this gentleman has long advocated what he considers a righteous cause; but let the League beware: even temperance now shares not his undivided affection. *Note.*—I insert Mr. Easton's name at his own request, because, being well known in almost every quarter of Scotland, he invites all who may doubt this case to ask particulars of himself.

'*Edinburgh, 22d November 1867.*—The foregoing particulars are correctly stated; and as the lady who showed me the pamphlet was Miss —, who sung two lines to the tune of Old Hundred (Case III.) I certify that her case also (by her own accounts) is strictly true.

'GEORGE EASTON.'

CASE XIV.—*Case of Tic, worth the attention of Sufferers in general, and Homœopaths in particular.*—(24th November.)

Mr. L. P., shoemaker, Biggar, has been subject to severe attacks of tic for the last twenty years, during which period I have treated him myself some eight or ten times, with quinine, etc., and various external applications; the attacks generally lasting a fortnight or thereby. On Thursday, the 21st, he consulted me for an attack of his old enemy. This was the *fifth* day of the disease. The pain was most acute in left eyeball, and above the eyebrow across to the temple. It always came on about nine A.M., and lasted till early in the afternoon. I gave as usual a dozen of quinine powders, one to be taken three times daily; and as the patient was suffering much during the consultation, I applied on the instant a pledget of lint, soaked with strong sulphurous acid, and covered over this pledget with oiled silk. I gave him also a phial of the acid, to repeat the application for a few times. In half an hour the pain was gone, before he had time to take one dose of quinine!

What makes me think that the sulphurous acid was the cause of relief is, that the pain left on that occasion two hours before its usual time; and, especially, that it has never since returned, except to a trifling extent next day. When he felt it threaten, he fain would have applied the acid and lint to the eyebrow again; but the part being all blistered from three applications of the previous day, he very sagaciously adopted milder measures. Uncorking his bottle he took a few sniffs up his nostrils, and the potent imponderable homœopathic dose, thus imbibed, checked it in a moment.

Note.—It would be rash to draw conclusions from a single case. But if this be a fair sample of how we are to deal with tic in future, what a curative weapon have we not discovered for fighting not only tic, but toothache, rheumatism, neuralgia, sciatica, and a host of other

most intractable diseases? Medical men! and sufferers all! who may read this case, please give this simple plan a trial. By communicating the result to the author, you may confer a boon on the world at large.

Note.—Since writing the foregoing, I can report as follows :—*Slight case of Earache.*—One day's duration; slight pain; disagreeable ringing in ear: considerable deafness. *Treatment.*—A few whiffs of spray. *Immediate Result.*—No pain; no ringing; hearing perfect. *Result next day.*—Hearing keeps perfect; ringing scarcely perceptible; kept free of pain till midnight, remained sharp for several hours, towards morning some blood escaped from ear, giving great relief. Now (twenty-four hours after spray) so nearly well, that she won't have another whiff.

Toothache.—My experience in toothache is, that spray generally gives relief, but not invariably. To-day I tried *first* soaking the cavity with strong acid, then applying a pledget of lint, wet with acid, between the gum and cheek. *Result.*—Immediate relief, which continued during the fifteen minutes of the patient's stay in my house. *Query.*—How will this acid, frequently applied, affect the teeth? Do harm, like other acids? or good, by preventing decomposition and decay?

WHAT IS THE GREAT SULPHUR CURE?

From the GLASGOW DAILY HERALD, November 25, 1867.

“‘THE Great Sulphur Cure’ has divided public attention in this quarter during the last few days with the Fenians, the opening of Parliament, and the reported submersion of Tortola. Everybody has been asking his neighbour, ‘Is there anything in it?’ and we believe there has been a very extensive application of ‘brimstone fumes’ and ‘sulphurous acid spray’ to the sore throats and stuffed nostrils that are not uncommon at this foggy season of the year. Have we got hold of a new specific that is to revolutionize the Pharmacopœia? Have we only now discovered the virtues latent in a medicine which has been known to us for three hundred years? Or is the ‘Sulphur Cure’ only another example of the ‘infallible remedies’ after which the world, and sometimes the profession itself, has run mad? The remedy comes endorsed, as yet, only from Kirkealdy and Biggar, neither of them regions from which one might expect much new light on medical science. But then we know that it is not always from the centres of science that discoveries come, but rather from obscure nooks, where ingenious men have the opportunity of unbiassed experiment and reflection. Dr. Dewar, of Kirkealdy, and Dr. Pairman, of Biggar, are neither quacks nor charlatans, and would not have written their pamphlets if they did not believe that their cures had been fairly effected by the aid of the sulphur remedy. There need be no unnecessary prejudice, therefore, against the ‘cure,’ because it comes from the unknown, and not from the classic shades of medicine, though at the same time it must be admitted that its obscure parentage is nothing in its favour.

“Some of our readers who have not read the pamphlets of the Kirkealdy and Biggar medical men, or our analyses of them, may ask ‘What is the Sulphur Cure?’ Philosophically speaking, we do not know that there has been any attempt to answer this question. Dr. Dewar’s impression seems to be that a great many of our worst diseases have their origin in animal or vegetable growths, in the presence

of animaleulæ or impereceptible fungi germs, and that sulphur is the 'sovereignest remedy' for destroying these impalpable organisms, either in the air or in the human system. His pamphlet is headed by a quotation from a Frenchman, who in 1866 looked forward to the discovery of some *parasiticide* gas, some powder or liquid, which would massaere these vampires of the air. Dr. Dewar believes that in sulphurous acid gas he has found this blessed parasiticide, which not only cures, but prevents the spread of diseases of this nature, inasmuch as it cuts off the source from which they come—the parasites in the atmosphere. Here is a theory, then, which is well worth the careful investigation of medical men. Of course, we cannot pretend to say what amount of truth there is in it, or whether there is any truth in it at all; but the results which Dr. Dewar obtained when he began to put his theory in practice, are certainly very striking. He may be wrong in assuming that the disease known as rinderpest is of a parasitic nature, and that sulphurous acid gas kills the parasites and so protects the cattle; but he has shown, at all events, that in his own case the fumigation of byres by sulphur is a preventive to the spread of the disease, whatever be its nature. He may also be wrong in thinking that human beings can breathe, without any deleterious effects, an atmosphere so admixed with the fumes as to destroy the subtle and fatal organisms from which he supposes many diseases come; but he has proved from his experiments that patients suffering from consumption, fevers, and a great many other diseases, have been greatly benefited, and in some cases completely cured, by being subjected to a sulphurous atmosphere, or to sulphurous medication. The case of his own groom is a very singular one. He was far gone in consumption, and not expected to live for any time, when he was called upon to tend the sulphurous experiment upon some cattle. The effect of the remedy was even more marked upon the groom than the brutes. He began to recover immediately, and all the bad consumptive symptoms left him; he gained in weight, and though now depending upon one lung for breath, 'he looks,' says Dr. Dewar, 'nearly as strong, and is as able for ordinary stable work as he was previous to his illness.' One case will never prove the truth of a theory, nor the efficacy of a remedy; and even in the present instance the cure seems to have been temporary only, for the groom was subsequently ill of his old complaint, but practised, and had 'still confidence in fumigation.' Apparently, however, there could be no doubt of the great sanitary influence of the sulphur, and we refer to this case because it is well known, and has been investigated by several able medical men.

"Dr. Dewar tried the new remedy upon almost every class of patients, and invariably, he tells us, with beneficial results. It did not matter much, it seems, what the disease was—whether a simple cough or the most complicated case of tubercular disease, whether a cut or the cholera, fumigation or the use of the 'spray producer' gave instant relief, and in many cases effected complete cures. An epidemic of diphtheria was got under by the application of the remedy, and some quite marvellous results produced. Rheumatisms, asthmas, chest diseases, bronchitis, typhoid fevers, eroup, influenza, toothache, constipation, diarrhoea, and nearly all the ills that flesh is heir to, were successively treated by the sulphurous acid gas, and always with marked consequences for good. A venerable turkey-cock, very much indisposed, was restored to his wonted swagger and strut by a dose or two of the beneficent fumes. A little fellow who had cut his eyelid was saved from that disreputable adjunct of the fighting blackguard, 'a black eye,' by the same means. A case of hysteria was cured by sulphur, and one young married woman from Lanark, suffering from mental disease, was rescued from her 'delusions' and 'religious despondency' by repeated fumigations. The latter case is remarkable certainly, for it shows that sulphur is also efficacious in diseases not derived from parasitic origin, unless Dr. Dewar alleges that parasites were the cause of this young woman's 'religious despondency.' We are inclined to think that the citation of a 'case' of this kind is apt to damage the cause of sulphur, and raise sceptical suggestions. Dr. Dewar must see that it is quite possible that the change of scene and air, the change of company and circumstances, must have had, as it has had a thousand times before, a beneficial effect upon the mind, and that probably these, and not the sulphur, were the great curative agents. The fact which may be gathered from all the cases given by Drs. Dewar and Pairman is, that fumigation by sulphur produces an atmosphere which has considerable sanatory influence upon patients; and the application of sulphurous acid in spray in cases of colds, sore throats, etc., seems to be highly beneficial. So much their experiments indicate, but it will need a much wider induction to assure us of the universality of the remedy.

"It will be seen from all this that brimstone is not the terribly wicked agent in nature which it has long been held to be by the popular imagination. A certain personage who generally made his appearance with a long tail and a cloven hoof invariably brought along with him, it was said, a 'smell of sulphur;' but if Dr. Dewar and Dr. Pairman's views are correct, it is evident that it will be the doctor, and not the devil, to whom the odour will in future peculiarly belong. Seriously

speaking, this is a matter to which the attention of the medical faculty ought to be immediately directed. We have very few real remedies which can be trusted in the whole range of therapeutics, and cannot, therefore, afford to despise, without thoroughly testing, one for which such great claims are made. If it is a valuable cure, its value is enhanced a thousandfold by the simplicity with which it can be applied, and the ease with which it can be procured. We have no faith in infallible prescriptions or universal panaceas, but it is quite possible that Dr. Dewar's investigations may have added one to the scanty remedies which the medical art has been so slow in giving to the world."